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ABSTRACT

This report presents nationwide data on the well-being of U.S. children. The statistical report is based on indicators of child well-being such as family income and mortality rates. The first part of the report, "Population and Family Characteristics," presents data that illustrate the changes that have taken place during the past few decades in six key demographic measures including children as a proportion of the U.S. population, family structure, and difficulty speaking English. The second part of the report, "Indicators of Children's Well-Being," presents data on 26 key indicators in the following areas: (1) "Economic Security," including family income, secure parental employment, housing, and access to health care; (2) "Health," including activity limitation, infant and child mortality rates, and immunization rates; (3) "Behavior and Social Environment," including substance abuse, and youth victims and perpetrators of serious violent crimes; (4) "Education," including family reading to young children, and youths neither enrolled in school nor working; and (5) "Special Features," which covers blood lead levels, and child care. For each background measure in the report's first section and for each indicator in the second section, three types of information are presented: a short statement about why the measure or indicator is important to understanding the condition of children, figures showing important facts about trends or population groups for each indicator, and highlights with information on

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current status, recent trends, and important differences by population groups noted. Two appendices contain detailed tables of data and data source descriptions. The report notes that several indicators show an improving picture of the well-being of most children, but those living below the poverty line continue to compare unfavorably with those above the poverty line, and there is also disparity in well-being for different race and ethnic groups. Death rates among adolescents and birth rates among adolescent females have declined; there has also been a decline in the rates for which youths 12 to 17 were either victimized by serious violent crime or perpetrated violent crime; substance abuse, however, has increased. (HTH)

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Federal Interagency Forum on Child and Family Statistics 1998

# America's Children: Key National Indicators of Well-Being

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Forum on Child and Family Statistics

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Federal Interagency Forum on Child and Family Statistics 1998

# America's Children: Key National Indicators of Well-Being

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# Federal Interagency Forum on Child and Family Statistics

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# Foreword

This volume is the second annual report presenting an overview of the well-being of America's children. Prepared by the Interagency Forum on Child and Family Statistics, as required by President Clinton's Executive Order No. 13045, the report is a product of collaborative efforts by 18 Federal agencies. Readers will find here an accessible compendium—drawn from the most recent, most reliable official statistics—to both the promises and the difficulties confronting our Nation's young people.

*America's Children: Key National Indicators of Well-Being, 1998* updates information displayed in last year's report and incorporates several improvements. For example, four indicators have been expanded to fill gaps identified in last year's report. Other indicators have been renamed to clarify their meaning. These changes implement many of the helpful comments and suggestions for improvements provided by users of the 1997 report.

But this report also serves another important purpose. Although the Forum agencies collect a considerable amount of information about children, they still fail to capture important aspects of children's lives. By displaying what the Government knows, and what it does not know, this report challenges Federal statistical agencies to do better. Forum agencies are meeting that challenge. They are undertaking an array of efforts that will yield more comprehensive information in future years. For example, several agencies are working to improve the collection and dissemination of data on children's family structures and on the role of fathers in children's lives.

The Forum should be congratulated for taking a hard look at current indicators of children's well-being and for working to improve our knowledge of the condition and progress of America's children. The Forum agencies invite you, the reader, to suggest ways we can continue to enhance this annual portrait of the Nation's most valuable resource—its children. I applaud the Forum agencies' continuing dedication to this effort. I hope that you, too, will find this report a useful contribution to your work.

**Katherine K. Wallman**
*Chief Statistician*
*Office of Management and Budget*

# Acknowledgments

This report reflects the commitment and involvement of the members of the Federal Interagency Forum on Child and Family Statistics. It was prepared by the Writing Subcommittee of the Reporting Committee of the Forum. David Johnson, Bureau of Labor Statistics, chaired the committee, and its members included: Dawn Aldridge, Food and Nutrition Service; Barbara Allen-Hagen, Office of Juvenile Justice and Delinquency Prevention; Ken Bryson, Bureau of the Census; Katherine Heck, National Center for Health Statistics; Andrea Kopstein, National Institute on Drug Abuse; Laura Lippman, National Center for Education Statistics; and Kathryn Nelson, Department of Housing and Urban Development.

Many other staff members of the agencies participating in the Forum provided data, developed indicators, or wrote parts of the report. They include: Alanna Moshfegh and Mary Hama, Agricultural Research Service; Robert Bennefield, Lynne Casper, Joseph Dalaker, Rick Denby, Stephen Heacock, Fred Hollman, Lisa Kuzmeskus, Martin O'Connell, Colby Perkins, and Linda Showalter, Bureau of the Census; Robert McIntire and Howard Hayghe, Bureau of Labor Statistics; Ed Maes, Centers for Disease Control and Prevention; Michael Rand, Bureau of Justice Statistics; Margaret Andrews and Gary Bickel, Food and Nutrition Service; DeeAnn Brimhall, Edith McArthur, Marilyn McMillen, and Karen Weiner, National Center for Education Statistics; Debra Brody, Robin Cohen, Lois Fingerhut, Donna Hovert, John Kiely, Laura Montgomery, Gloria Simpson, and Stephanie Ventura, National Center for Health Statistics; Matt Stagner, Office of the Assistant Secretary for Planning and Evaluation.

Other individuals who assisted with the report included Lloyd Johnston and Patrick O'Malley, Institute for Social Research, University of Michigan; and Steve Agbavani, Yupin Bae, and Tak Woo, Pinkerton Computer Consultants, Inc.

Education Statistics Services Institute in support of the National Center for Education Statistics assisted the committee in producing the report. Alexandra Tan oversaw the compilation, tabulation, and presentation of data, reviewed drafts of the report, and wrote and edited major portions of the report. Stacey Leaman and Mark White produced tables, figures, and text, provided research support, and assisted the committee. Molly Soule also provided research support. Anne Meek assisted in drafting the highlights. Qiwu Liu and Leslie Levitan, American Institutes for Research, helped in preparing files for agency updates.

The following staff members made valuable contributions in their reviews of the report: Helen Howerton, Administration for Children and Families, Health and Human Services; Denise Dougherty, Agency for Health Care Policy and Research; Lynne Casper, Jennifer Day, Robert Kominski, Chuck Nelson, Martin O'Connell, Kathy Short, Greg Spencer, and Ed Welniak, Bureau of the Census; Caroline Harlows and Michael Rand, Bureau of Justice Statistics; Eugene Becker, Howard Hayghe, and Deborah Klein, Bureau of Labor Statistics; Ed Maes, Centers for Disease Control and Prevention; Margaret Andrews, Gary Bickel, and Steven Carlson, Food and Nutrition Service; Linda Gordon, Immigration and Naturalization Service; Woodie Kessel and Michelle Kiely, Maternal and Child Health Bureau; Kathryn Chandler, Mary Frase, Arnold Goldstein, Edith McArthur, Marilyn McMillen, Martin Orland, John Ralph, Tom Snyder, Karen Weiner, and Jerry West, National Center for Education Statistics; John Kiely, Jennifer Madans, Laura Montgomery, Gloria Simpson, and Stephanie Ventura, National Center for Health Statistics; Jeff Evans, National Institute of Child Health and Human Development; Chris Snow and Matt Stagner, Office of the Assistant Secretary for Planning and Evaluation, Health and Human Services; Richard Bavier and Nancy Kirkendall, Office of Management and Budget; Mary Hama and Alanna Moshfegh, Department of Agriculture, Agricultural Research Service; Jacqueline Bhola, Women's Bureau. Barbara Wilson and the Questionnaire Design Research Laboratory conducted cognitive testing on the 1997 report and provided valuable recommendations for the 1998 report.

Eugene Becker, Division of BLS Publishing, Bureau of Labor Statistics, and Keith Tidman, American Institutes for Research, edited various versions of the report. Design contributions came from Cyndi Cliff, James Durham, and Sally Janin of Janin/Cliff Design, who designed the cover and text layout. The logo was developed by John Jeter of the National Center for Health Statistics. Bob LeGrand, Office of Educational Research and Improvement, U.S. Department of Education, coordinated the printing of the report.

# Highlights

*America's Children: Key National Indicators of Well-Being, 1998* presents in a single document 23 key indicators on important aspects of children's lives, including their economic security, health, behavior and social environment, and education. This report also presents data on six key demographic measures and includes two measures of child well-being as special features. This is the second annual effort to monitor the overall status of the nation's children. Highlights include the following:

- Several indicators show an improving picture of the well-being of most children, but not all children share in this improvement. The well-being of children living below the poverty line continues to compare unfavorably to those living above the poverty line. For example, children living below the poverty line are more likely to suffer from poor general health, to have high levels of blood lead, and to have no usual source of health care. They are also more likely to experience housing problems and hunger, less likely to be enrolled in early childhood education, and less likely to have a parent working full-time all year.
- In addition to the differences in well-being by poverty status, there is also disparity in well-being for different race and ethnic groups. Black children continue to fare less favorably than white children, and Hispanic children also fare less favorably than white non-Hispanic children on some indicators, such as high school completion.

## Part I: Population and Family Characteristics

- In 1997, children under age 18 numbered 69.5 million, or 26 percent of the population, down from a peak of 36 percent at the end of the baby boom. In each age group—0-5, 6-11, and 12-17 years—there were approximately equal numbers, about 23 million per group.
- The ethnic diversity of America's children continues to increase. The proportion of Hispanic children is increasing rapidly, relative to children in other racial and ethnic groups. Hispanic children now slightly outnumber black, non-Hispanic children.

## Part II: Indicators of Children's Well-Being

### *Economic Security Indicators*

- The poverty rate of children is holding steady at 20 percent, about where it has been since 1981. However, since 1980, the percent of children living in families with medium income has fallen, while the percent of children living in families with high income and the percent of children living in families with extreme poverty have risen. These shifts show an increase in income disparity among children.
- Children under 18 continue to represent a very large segment of the poor population (40 percent) even though they are only about one-fourth of the total population. Children under age 6 living in female-householder families are particularly at risk for living in poverty. In 1996, 59 percent of these children were living below the poverty line, compared with 12 percent of children under 6 living in married-couple families. In 1996, 10 percent of white, non-Hispanic children lived below the poverty line, compared to 40 percent of black children and 40 percent of Hispanic children.
- The number of children who had no health insurance at any time during 1996 grew to 10.6 million or 15 percent of all children from the 1995 levels of 9.8 million and 14 percent, respectively.

### *Health Indicators*

- Most children in the United States are healthy. In 1995, about 81 percent of children were reported by their parents to be in very good or excellent health, and this percentage remained stable between 1984 and 1995. Child health varies by poverty status. In 1995, about 65 percent of children in families below the poverty line were in very good or excellent health, compared with 85 percent of children in families living at or above the poverty line.
- In 1996, low birthweight rates were the highest in two decades. However, despite the frequency of low birthweight, infant mortality continues to decline, primarily because the likelihood for the highest-risk infants to survive has improved substantially. Black infants continue to be at much higher risk of low birthweight and infant mortality than infants of other races.

- In 1996, 77 percent of children ages 19 to 35 months were up to date with their immunizations. Children in poor families were less likely to be up to date with their immunizations than children with family incomes at or above the poverty level (69 percent compared to 80 percent).
- Death rates among adolescents ages 15 to 19 are on the decline after increasing during the late 1980s and early 1990s. Firearm deaths, mostly homicides, which increased during this period and peaked in 1994, accounted for the growth in death rates in earlier years.
- Birth rates among adolescent females declined between 1991 and 1996. This drop in adolescent birth rates was especially large among black females ages 15 to 17. In 1996, 85 percent of births to 15- to 17-year-olds were to unmarried mothers, compared to 62 percent in 1980.

### *Behavior and Social Environment Indicators*

- The percentages of 8th, 10th, and 12th graders who smoked daily, drank heavily or used illicit drugs have increased during the 1990s.
- In recent years there has been a decline in the rates for which youth ages 12 to 17 were either victimized by serious violent crime or were the perpetrators of serious violent crime. In 1993, the victimization rate was 44 per 1,000; in 1996, that rate fell to 33 per 1,000, lower than the rate in 1980 (38 per 1,000). Between 1993 and 1996, the violent crime rate fell from 52 to 36 per 1,000, compared to a rate of 35 per 1,000 in 1980.

### *Education Indicators*

- In 1996, 57 percent of children ages 3 to 5 were read aloud to by a family member every day in the last week, up slightly from 53 percent in 1993. Sixty-four percent of white, non-Hispanic children, 44 percent of black, non-Hispanic children, and 39 percent of Hispanic children were read to every day in 1996.
- Between 1982 and 1996, average math scores increased for 9-, 13-, and 17-year-olds, with 9-year-olds experiencing the largest increase. Since 1980, average reading scores have not improved among 13- and 17-year-olds and have declined among 9-year-olds. White, non-Hispanic students consistently have had higher reading and math scores than either black, non-Hispanic or Hispanic students.
- The high school completion rate for 18- to 24-year-olds has increased slightly since 1983, when it was 84 percent; in 1996, it was 86 percent. The proportion of young adults obtaining a high school diploma through an alternative method such as taking a General Education Development test increased by 5 percentage points in 3 years, from 5 percent in 1993 to 10 percent in 1996. In contrast, the proportion earning a regular diploma decreased about 5 percentage points over the same period.
- College completion rates rose between 1995 and 1997. The percentage of high school graduates ages 25 to 29 who completed a bachelor's or more advanced degree was 26 percent in 1980, rose to 28 percent in 1995, and increased again to 32 percent in 1997.

### *Special Features*

- Blood lead levels in children ages 1 to 5 have declined dramatically. In 1976-80, 88 percent of children ages 1 to 5 had an elevated level of blood lead. By 1988-94, this percentage had decreased to 6 percent. This huge decrease in blood lead levels resulted from legislation banning lead from paint and plumbing supplies and from the phasing out of lead in gasoline.
- In 1995, 6 out of 10 children under the age of 6—more than 12.9 million—who had not yet entered kindergarten were receiving some type of child care and education on a regular basis from persons other than their parents.

# Summary List of Indicators

| Indicator Name | Description of Indicator | Value | Year |
|---|---|---|---|
| **Economic Security** | | | |
| Child poverty and family income | Percentage of children under age 18 in poverty | 20 | 1996 |
| Secure parental employment | Percentage of children under age 18 living with parents with at least one parent employed full-time all year | 75 | 1996 |
| Housing problems | Percentage of households with children under age 18 that report any of three housing problems | 36 | 1995 |
| Food security | Percentage of children under age 18 in households experiencing food insecurity with moderate hunger | 3 | 1995 |
| | Percentage of children under age 18 in households experiencing food insecurity with severe hunger | 1 | 1995 |
| Access to health care | Percentage of children under age 18 covered by health insurance | 85 | 1996 |
| | Percentage of children under age 18 with no usual source of health care | 8 | 1995 |
| **Health** | | | |
| General health status | Percentage of children under age 18 in very good or excellent health | 81 | 1995 |
| Activity limitation | Percentage of children ages 5 to 17 with any limitation in activity resulting from chronic conditions | 7 | 1995 |
| Low birthweight | Percentage of infants weighing less than 5.5 pounds at birth | 7.4 | 1996 |
| Infant mortality | Deaths before the first birthday per 1,000 live births | 7.2 | 1996 |
| Childhood immunizations | Percentage of children ages 19 to 35 months who received combined series immunization coverage | 77 | 1996 |
| Child mortality | Deaths per 100,000 children ages 1 to 4 | 30 | 1996 |
| | Deaths per 100,000 children ages 5 to 14 | 22 | 1996 |
| Adolescent mortality | Deaths per 100,000 adolescents ages 15 to 19 | 84 | 1995 |
| Adolescent births | Births per 1,000 females ages 15 to 17 | 34 | 1996 |
| **Behavior and Social Environment** | | | |
| Regular cigarette smoking | Percentage of 8th-grade students who reported smoking daily in the previous 30 days | 9 | 1997 |
| | Percentage of 10th-grade students who reported smoking daily in the previous 30 days | 18 | 1997 |
| | Percentage of 12th-grade students who reported smoking daily in the previous 30 days | 25 | 1997 |
| Alcohol use | Percentage of 8th-grade students who reported having five or more alcoholic beverages in a row in the last 2 weeks | 15 | 1997 |

| Indicator Name | Description of Indicator | Value | Year |
|---|---|---|---|
| Alcohol use (continued) | Percentage of 10th-grade students who reported having five or more alcohol beverages in a row in the last 2 weeks | 25 | 1997 |
| | Percentage of 12th-grade students having five or more alcoholic beverages in a row in the last 2 weeks | 31 | 1997 |
| Illicit drug use | Percentage of 8th-grade students who have used illicit drugs in the previous 30 days | 13 | 1997 |
| | Percentage of 10th-grade students who have used illicit drugs in the previous 30 days | 23 | 1997 |
| | Percentage of 12th-grade students who have used illicit drugs in the previous 30 days | 26 | 1997 |
| Youth victims and perpetrators of serious violent crimes | Rate of serious violent crime victimizations per 1,000 youth ages 12 to 17 | 33 | 1996 |
| | Serious violent crime offending rate per 1,000 youth ages 12 to 17 | 36 | 1996 |
| **Education** | | | |
| Family reading to young children | Percentage of children ages 3 to 5 who are read to every day by a family member | 57 | 1996 |
| Early childhood education | Percentage of children ages 3 to 4 who are enrolled in preschool | 45 | 1996 |
| Mathematics and reading achievement (0-500 scale) | Average mathematics scale scores of 9-year-olds | 231 | 1996 |
| | Average mathematics scale scores of 13-year-olds | 274 | 1996 |
| | Average mathematics scale scores of 17-year-olds | 307 | 1996 |
| | Average reading scale scores of 9-year-olds | 212 | 1996 |
| | Average reading scale scores of 13-year-olds | 259 | 1996 |
| | Average reading scale scores of 17-year-olds | 287 | 1996 |
| High school completion | Percentage of young adults ages 18 to 24 who have completed high school | 86 | 1996 |
| Youth neither enrolled in school nor working | Percentage of youth ages 16 to 19 who are neither in school nor working | 9 | 1997 |
| Higher education | Percentage of high school graduates ages 25 to 29 who have completed a bachelor's degree or higher | 32 | 1997 |
| **Special Features** | | | |
| Blood lead levels | Percentage of children ages 1 to 5 with 10 or more micrograms of lead per deciliter of blood | 6 | 1988-94 |
| Child care | Percentage of children under age 6 participating in child care and early childhood education programs on a regular basis | 60 | 1995 |

# About This Report

*America's Children: Key National Indicators of Well-Being, 1998*, developed by the Federal Interagency Forum on Child and Family Statistics, represents the second annual synthesis of information on the status of the Nation's most valuable resource, our children. This report presents 23 key indicators of the well-being of children. These indicators are monitored through official Federal statistics covering children's economic security, health, behavior and social environment, and education. The report also presents data on six key demographic measures and includes as special features two additional measures of child well-being. In this year's report, the 18 agencies of the Forum have introduced improvements in the measurement of several of the indicators presented last year, and have developed some new indicators.

## What is the purpose of this report?

This report provides the Nation with a broad annual summary of national indicators of child well-being and monitors changes in these indicators over time. The Forum hopes that this report also will stimulate discussions by policy-makers and the public, exchanges between the data and policy communities, and improvements in Federal data on children and families.

## How is the report structured?

*America's Children: Key National Indicators of Well-Being, 1998* is intended to present information and data on the well-being of children in a non-technical, user-friendly format. It is designed to complement other more technical or comprehensive reports produced by the Forum agencies. The report is divided into two parts.

The first part of the report, *Population and Family Characteristics*, presents data that illustrate the changes that have taken place during the past few decades in six key demographic measures. These background measures provide an important context for understanding the key indicators and the child population. They also provide basic information about children in the United States, as well as the socio-demographic changes that are occurring in the child population. These data series answer questions such as: How many children are there in the United States? What proportion of the population are children? How racially diverse are our children? How many have difficulty speaking English? What types of families do they live in?

The second part, *Indicators of Children's Well-Being*, contains data on key indicators, or measures, of how well we are doing in providing economic security, educational opportunity, and a healthy and safe environment for children to play, learn, and grow. Unlike the data presented in Part I of the report, which simply describe the changing context in which children are growing, the data series in Part II offer insight into how well children are faring by providing information in four key areas of child well-being: economic security, health, behavior and social environment, and education.

The economic security indicators document poverty and income among children and the accessibility of basic necessities such as food, housing, and health care. The health indicators document the physical health and well-being of children by presenting information on their general health status, immunization coverage, and their likelihood, at various ages, to die. The behavioral and social environment indicators take a hard look at how many of our youth are engaging in illegal, dangerous, or high-risk behaviors such as smoking, drinking alcohol, using illicit drugs, or involvement in serious violent crimes. Finally, the education indicators examine how well we are succeeding in educating our children. They include measures that capture preschoolers' exposure to reading and early education, measures of student achievement, and indicators of how many young adults complete high school and college.

For each background measure in *Part I: Population and Family Characteristics*, and each indicator in *Part II: Indicators of Children's Well-Being*, three types of information are presented:

- A short statement about why the measure or indicator is important to the understanding of the condition of children;
- Figures showing important facts about trends or population groups for each indicator; and
- Highlights with information on current status, recent trends, and important differences by population groups noted.

In addition, *Appendix A: Detailed Tables* contains tabulated data for each measure and additional detail not discussed in the main body of the report. *Appendix B: Data Source Descriptions* contains information and descriptions of the sources and surveys used to generate the indicators.

## Why are some indicators called special features?

At the end of Part II, *America's Children: Key National Indicators of Well-Being, 1998* presents data on two indicators that we have called "special features." The special features present data that are not available with sufficient frequency to be considered regular key indicators, but nevertheless provide information on extremely important measures of child well-being. This year we have included two special features: *Blood Lead Levels* and *Child Care*.

## How has the report changed since last year?

*America's Children: Key National Indicators of Well-Being, 1998* is similar to last year's report in both format and content. While most of the indicators presented last year are included and updated, the Forum has worked to improve the report in a number of important ways. Some of the changes reflect improvements in the availability of data for certain key indicators. Some changes better clarify the concept being measured or reflect the expanded nature of the indicator. Many of the changes are the result of an evaluation done by the National Center for Health Statistics Questionnaire Design Research Laboratory to help make the report clear and user-friendly to a non-technical audience. All the changes reflect the many helpful comments and suggestions for improvements that were received from readers and users of the 1997 report.

## How were the key indicators selected?

*America's Children: Key National Indicators of Well-Being, 1998* presents a selected set of key indicators of children's status that measure critical aspects of children's lives and are collected rigorously and regularly by Federal agencies. The Forum chose these indicators through careful examination of available data. In determining this list of key indicators, the Forum sought input from the Federal policy-making community, foundations, academic researchers, and state and local children's service providers. These indicators were chosen because they are:

- *Easy to understand* by broad audiences;
- *Objectively* based on substantial research connecting them to child well-being and based on reliable data;
- *Balanced* so that no single area of children's lives dominates the report;
- *Measured regularly* so that they can be updated and show trends over time; and
- *Representative* of large segments of the population, rather than one particular group.

## What groups of children are included in this report?

In order to convey a comprehensive understanding of child well-being, the report looks at the status of all children under age 18 living in the United States. In most cases throughout the report, the word "children" refers to any person under age 18 living in a civilian or non-institutionalized setting in the United States. When data are being presented only for specific age groups, this is indicated in the text (e.g., children ages 1-4). As is also noted in the text, some indicators examine only particular groups of children (e.g., children living in family settings, children living with parents, children in certain age groups or grade levels). For most of the indicators, the relevant information has been reported by an adult in the household or family and not directly by the children.

In many cases we have also presented the data on children by race and Hispanic origin. Unless otherwise noted, estimates presented for particular races (white, black, American Indian or Alaska Native, Asian or Pacific Islander) include Hispanics of those races even when a separate estimate is given for Hispanics. In cases where Hispanics have been separated out, "non-Hispanic" will follow the race designation, as in "white, non-Hispanic."

## What are the sources for the data in this report?

Data for the key indicators are drawn primarily from national surveys and from vital records. Federal agencies regularly survey the population on many issues. These national surveys use interviewers to gather information on children through a variety of methods including speaking directly, by telephone or in person, with families selected through rigorous sampling methods. Federal agencies also collect information on births and deaths from state health departments. These nationally representative surveys along with data collected through vital statistics provide the best available measures of the condition of children. Although there are important areas of children's lives where administrative data from local social service agencies often are available, such measures were not

included in this report. The availability and quality of such data can be affected by policy differences among agencies in various local areas and by resource constraints.

In the textual presentation of data for this report, percents and rates were, as a rule, rounded to the nearest whole number (unless the data are from vital statistics or rounding would mask significant differences). The text discusses cross-time or between-group differences when the differences are statistically significant.

## What other data are needed?

*America's Children: Key National Indicators of Well-Being, 1998* points to critical gaps in the coverage and timeliness of the Nation's information on children and youth. It challenges the Nation as a whole—and the Federal statistical agencies in particular—to improve the monitoring of important areas of children's lives. It also challenges Federal agencies to improve the timeliness with which information on children is made available to policy-makers and the public.

At the end of *Part I: Population and Family Characteristics* and at the end of each section in *Part II: Indicators of Children's Well-Being*, the report presents a description of data and measures of child well-being in need of development. These lists include many important aspects of children's lives for which indicators are lacking or are in development, such as children's living arrangements, homelessness, long-term poverty, mental health, disability, neighborhood environment, and early childhood development. In each of these areas, the Forum is exploring ways to collect new measures and improve existing ones.

## Where can I get more information about the indicators?

There are several good places to obtain additional information on each of the indicators found in this report. First, for many of the indicators, *Appendix A: Detailed Tables* contains additional detail not discussed in the main body of the report. For example, some tables show additional detail on breakouts by gender, race, and Hispanic origin or another category. Second, *Appendix B: Data Source Descriptions* contains information and descriptions of the sources and surveys used to generate the indicators as well as information on how to contact the agency responsible for collecting the data or administering the relevant survey. Third, numerous publications of the Federal statistical agencies provide additional detail on each of the key indicators included in this report, as well as on scores of other indicators. These reports include *Trends in the Well-Being of America's Children and Youth*, published annually by the Office of the Assistant Secretary for Planning and Evaluation in the U.S. Department of Health and Human Services (HHS), *Youth Indicators*, published biennially by the National Center for Education Statistics, and *Health, United States*, published annually by the National Center for Health Statistics, Centers for Disease Control and Prevention. Often these compendiums contain additional details not reported in *America's Children*. *Appendix B* also contains a list of agency contacts that can provide further information on the relevant surveys and indicators.

## Can I find this report on the Internet?

The report can be found on the World Wide Web at http://childstats.gov. The web site version of the report contains data for years before 1990 that are presented in the figures but not in the tables in this report. The Forum's web site also contains information on the overall structure and organization of the Forum, as well as other reports, and news on current activities. The web site addresses of the Forum agencies are as follows:

**Department of Agriculture**
**Food and Nutrition Service:**
http://www.usda.gov/fcs/fcs

**Department of Commerce**
**Bureau of the Census:**
http://www.census.gov

**Department of Defense**
**Deputy Assistant Secretary of Defense (Personnel Support, Families and Education)**
http://dticaw.dtic.mil/prhome/das_psfe.html

**Department of Education**
**National Center for Education Statistics:**
http://www.nces.ed.gov

**Department of Health and Human Services**
**Administration for Children and Families:**
http://www.acf.dhhs.gov
**Agency for Health Care Policy and Research:**
http://www.ahcpr.gov
**Maternal and Child Health Bureau:**
http://www.hhs.gov/hrsa/mchb
**National Center for Health Statistics:**
http://www.cdc.gov/nchswww

**National Institute of Child Health and Human Development:**
http://www.nih.gov/nichd
**Office of the Assistant Secretary for Planning and Evaluation:**
http://aspe.os.dhhs.gov

**Department of Housing and Urban Development**
**Office of Policy Development and Research:**
http://www.huduser.org

**Department of Justice**
**Bureau of Justice Statistics:**
http://www.ojp.usdoj.gov/bjs
**National Institute of Justice:**
http://www.ojp.usdoj.gov/nij
**Office of Juvenile Justice and Delinquency Prevention:**
http://www.ncjrs.org/ojjdp

**Department of Labor**
**Bureau of Labor Statistics:**
http://www.bls.gov
**Women's Bureau:**
http://www.dol.gov/dol/wb

**National Science Foundation**
**Science Resources Studies Division:**
http://www.nsf.gov/sbe/srs

**Office of Management and Budget**
**Statistical Policy Office:**
http://www.whitehouse.gov/WH/EOP/OMB/html/ombhome.html

## What Is the Federal Interagency Forum on Child and Family Statistics?

The Forum is a formal structure for collaboration among 18 Federal agencies that produce or use statistical data on children and families. The members of the Forum are listed on the back of the title page. Building on earlier cooperative activities, the Forum was founded in 1994 and formally established by Executive Order No. 13045 in 1997 to foster the coordination and integration of the collection and reporting of data on children and families. The two major publications produced by the Forum are *America's Children: Key National Indicators of Well-Being* (1997 and 1998) and *Nurturing Fatherhood: Improving Data and Research on Male Fertility, Family Formation and Fatherhood*. In addition, the Forum undertakes the following activities:

- Developing priorities for improving the consistency in the collection of data and enhancing the collection of data on children and youth;
- Improving the reporting and dissemination of information on the status of children to the policy community and the general public; and
- Encouraging the production and dissemination of better data on children at the State and local levels.

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PART I

# Population and Family Characteristics

Part I: *Population and Family Characteristics* presents data that illustrate the changes that have taken place during the past few decades in six key demographic measures. It also provides basic information about children in the United States, as well as information on the socio-demographic changes that are occurring in the child population. The background measures provide an important context for understanding the key indicators and the child population.

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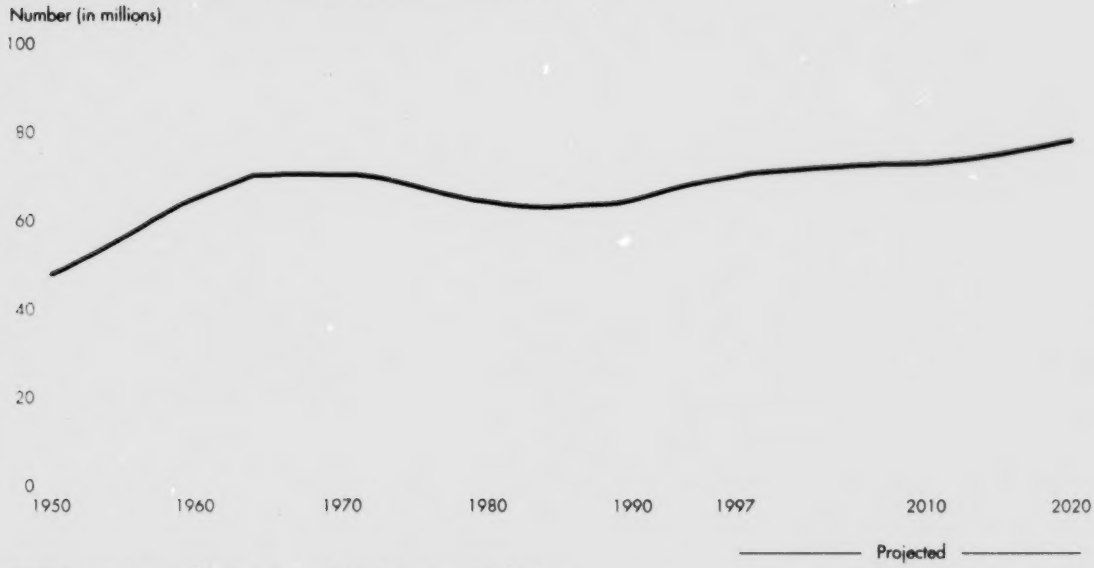
# Number of Children in the United States

The number of children determines the demand for schools, health care, and other services and facilities that serve children and their families.

**Figure POP1** **Number of children under age 18 in the United States, 1950-97 and projected 1998-2020**




SOURCE: U.S. Bureau of the Census, Population Estimates and Projections.

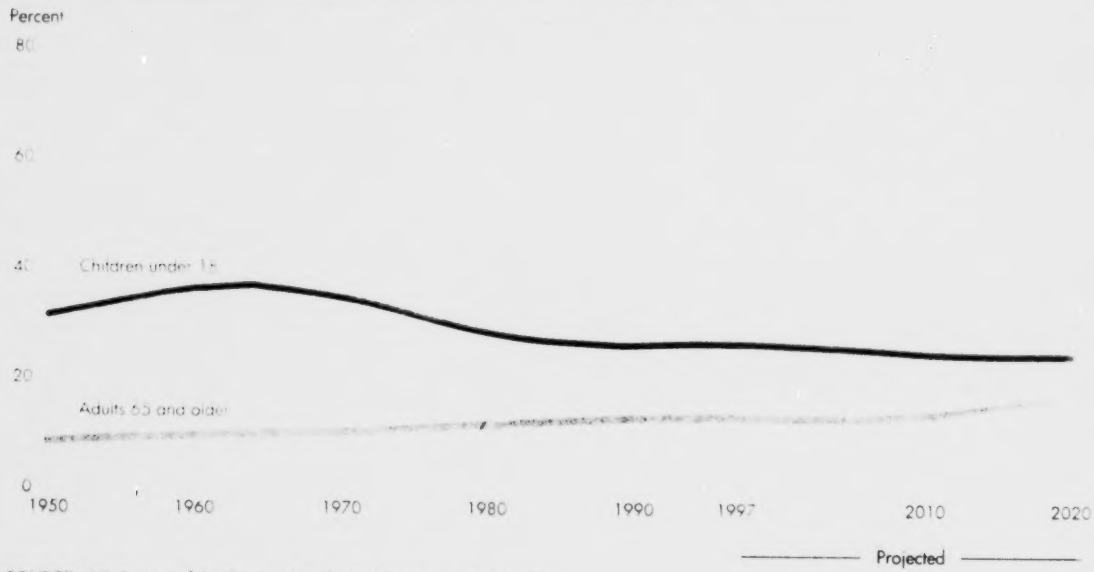
- In 1997, there were 69.5 million children in the United States, 0.5 million more than in 1996. This number is projected to increase to 77.6 million in 2020.
- The number of children under 18 has grown during the last half-century, increasing almost half again in size since 1950.
- During the "baby boom" (1946 to 1964), the number of children grew rapidly.
- During the 1970s and 1980s, the number of children declined and then grew slowly.
- Beginning in 1990, the rate of growth in the number of children increased, although not as rapidly as during the baby boom.
- In 1997, there were approximately equal numbers of children—about 23 million—in each age group 0-5, 6-11, and 12-17 years of age.

*Bullets contain references to data that can be found in Table POP1 on page 64.*

# Children as a Proportion of the Population

Though children represent a smaller percentage of the population today than in 1960, they are nevertheless a stable and substantial portion of the population and will remain so into the next century.

**Figure POP2** Children under age 18 and adults ages 65 and older as a percentage of the U.S. population: 1950-97 and projected 1998-2020




SOURCE: U.S. Bureau of the Census, Population Estimates and Projections

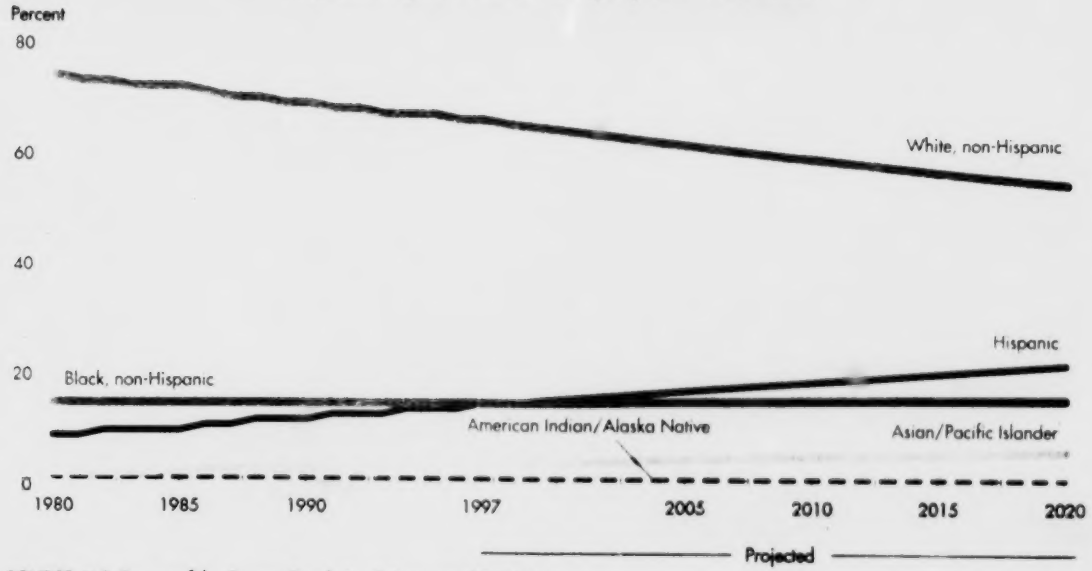
- In 1997, children made up 26 percent of the population, down from a peak of 36 percent at the end of the "baby boom."
- Since the mid-1960s, children have been decreasing as a proportion of the total U.S. population.
- Children are projected to remain a fairly stable percentage of the total population. They are projected to comprise 24 percent of the population in 2020.
- In contrast, senior citizens have increased as a percentage of the total population since 1950, from 8 to 13 percent. By 2020, they are projected to make up 16 percent of the population.
- Together, children and senior citizens make up the "dependent population": those persons who, because of their age, are less likely to be employed than others. In 1950, children made up 79 percent of the dependent population; by 1997, they made up 67 percent. That percentage is expected to continue to decrease, to 59 percent in 2020.

*Bullets contain references to data that can be found in Table POP2 on page 64.*

# Racial and Ethnic Composition

Racial and ethnic diversity has grown dramatically in the United States in the last three decades. This diversity is projected to increase even more in the decades to come.

**Figure POP3** **Percentage distribution of U.S. children under age 18 by race and Hispanic origin, 1980-97 and projected 1998-2020**




SOURCE: U.S. Bureau of the Census, Population Estimates and Projections.

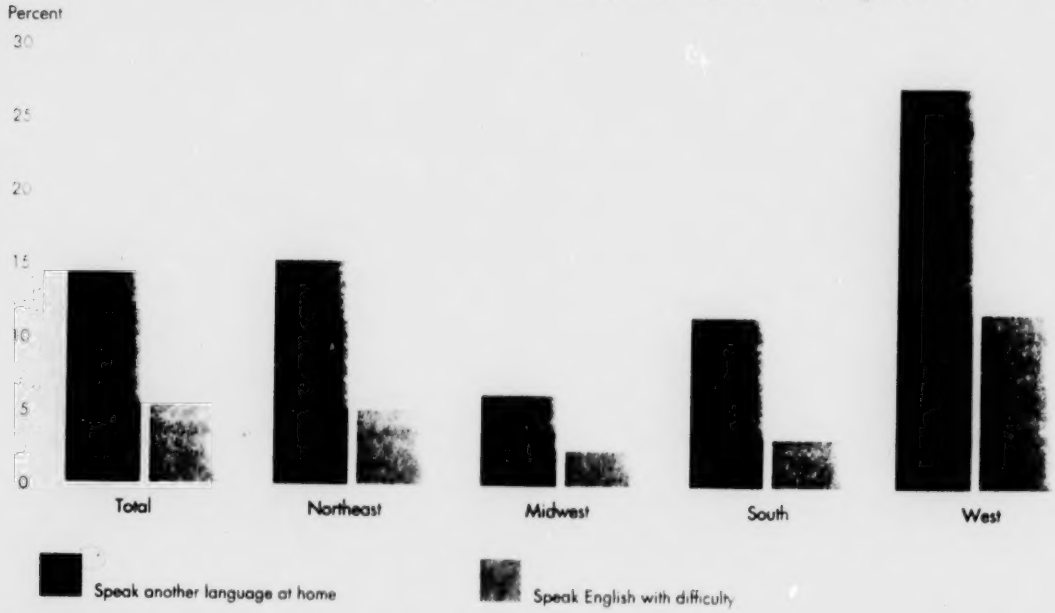
- In 1997, 66 percent of U.S. children were white, non-Hispanic; 15 percent were black, non-Hispanic; 15 percent were Hispanic; 4 percent were Asian and Pacific Islander; and 1 percent were American Indian or Alaska Native.
- The percentage of children who are white, non-Hispanic has decreased from 74 percent in 1980 to 66 percent in 1997.
- The percentages of black and American Indian/Alaska Native, non-Hispanic children have been fairly stable during the same period.
- The number of Hispanic children has increased faster than that of any other racial and ethnic group, growing from 9 percent of the child population in 1980 to 15 percent in 1997. By 2020, it is projected that more than 1 in 5 children in the United States will be of Hispanic origin.
- The percentage of Asian and Pacific Islander children doubled from 2 to 4 percent of all U.S. children between 1980 and 1997. Their percentage is projected to continue to increase to 6 percent in 2020.
- Increases in the percentages of Hispanic and of Asian and Pacific Islander children are due to both fertility and immigration. Much of the growth in the percentage of Hispanic children is due to the relatively high fertility of Hispanic women. In 1997, nearly half of the Hispanic children had mothers who were born in the United States.

*Bullets contain references to data that can be found in Table POP3 on page 65.*

# Difficulty Speaking English

Children who speak languages other than English at home and who also have difficulty speaking English[1] may face greater challenges progressing in school and, once they become adults, in the labor market. They may need special instruction to improve their English. Typically, once it is determined that a student speaks another language, school officials evaluate the child's English ability to determine whether the student needs services. Reported English speaking ability serves as an approximation of these evaluation measures.

**Figure POP4** Percentage of children ages 5 to 17 who speak a language other than English at home and who have difficulty speaking English by region, 1995




SOURCE: U.S. Bureau of the Census, October 1995 Current Population Survey. Tabulated by U.S. Department of Education, National Center for Education Statistics.

- The number of school-age children who spoke a language other than English at home and who had difficulty speaking English was 2.4 million in 1995, up from 1.25 million in 1979. This is 5 percent of all school-age children in the U.S.
- This percentage varies by region of the country, from 2 percent of children in the Midwest to 11 percent of children in the West.
- Likewise, the percentage of children who speak another language at home (with or without difficulty speaking English) varies by region of the country, from 6 percent of children in the Midwest to 26 percent of children in the West. This difference is due to differing concentrations of immigrants and their descendents in the regions.
- Children of Hispanic or Asian origin are more likely than non-Hispanic white or black children to have difficulty speaking English, since they are more likely to speak another language at home. Thirty-one percent of children of Hispanic origin and 14 percent of children of Asian and other origin had difficulty speaking English in 1995, compared with 1 percent of white non-Hispanic or black non-Hispanic children.

*Bullets contain references to data that can be found in Table POP4 on page 66. Endnotes begin on page 57.*

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# Family Structure

The number of parents living with a child is generally linked to the amount and quality of human and economic resources available to that child. Children who live in a household with one parent are substantially more likely to have family incomes below the poverty line than are children who grow up in a household with two parents.

**Figure POP5** **Percentage distribution of children under age 18 by presence of parents in household, 1980-97**

SOURCE: U.S. Bureau of the Census, March Current Population Survey.

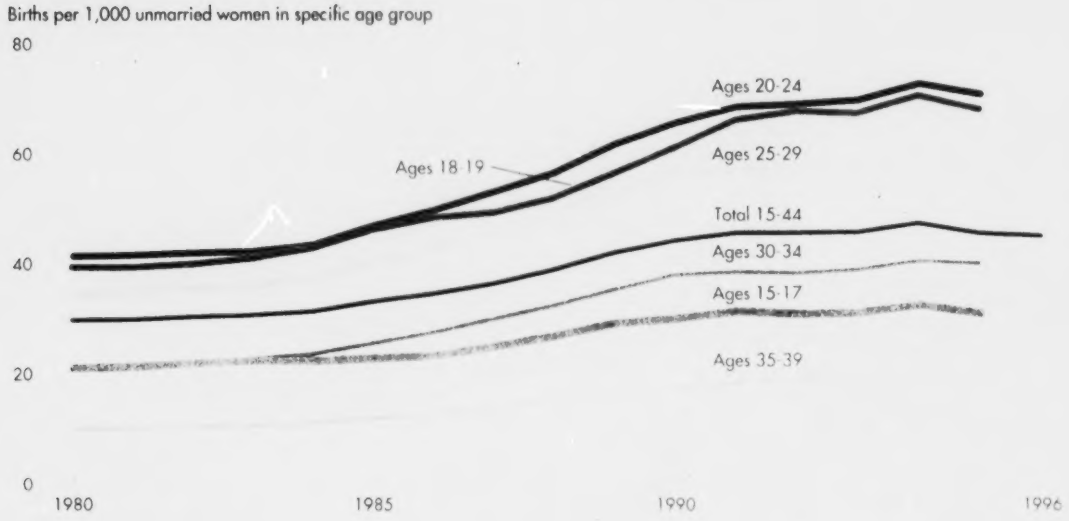
- In 1997, 68 percent of American children lived with two parents, down from 77 percent in 1980.
- In 1997, almost a quarter (24 percent) of children lived with only their mothers, 4 percent lived with only their fathers, and 4 percent lived with neither of their parents.
- The percent of children living with two parents has been declining among all racial and ethnic groups.
- White children are much more likely than black children and somewhat more likely than Hispanic children to live with two parents. In 1997, 75 percent of white children lived with two parents, compared to 35 percent of black children. Sixty-four percent of children of Hispanic origin lived with two parents.
- Among the factors contributing to the increase in children living with just one parent is the sharp rise in the percentage of all births that were to unmarried mothers.[2]

*Bullets contain references to data that can be found in Table POP5 on page 68. Endnotes begin on page 57.*

# Births to Unmarried Women

Increases in births to unmarried women are among the many changes in American society that have affected family structure and the economic security of children. Children of unmarried mothers are at higher risk of having adverse birth outcomes, such as low birthweight and infant mortality, and are more likely to live in poverty than children of married mothers.[3,4]

**Figure POP6** **Birth rates for unmarried women by age of mother, 1980-96**




NOTE: 1996 data are preliminary.
SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System

- There were 45 births for every 1,000 unmarried women ages 15 to 44 in 1996, according to preliminary data.
- Between 1980 and 1994, the birth rate for unmarried women increased from 29 to 47 per thousand. Between 1994 and 1996, the rate fell to 45 per thousand, according to preliminary data.
- During the 1980-94 period, birth rates increased sharply for unmarried women in all age groups. The birth rate for unmarried women ages 15 to 17 years increased from 21 to 32 per thousand. The birth rate for unmarried women ages 20 to 24 years increased from 41 to 72 per thousand. Rates by age declined for all women under age 40 between 1994 and 1995.
- One of every three births in 1996 was to an unmarried mother, about the same level as observed in 1994-95.[5]
- The rise between 1960 and 1996 in the nonmarital birth rate is linked to an increase in the proportion of women of childbearing age who are unmarried (from 29 percent in 1960 to 47 percent in 1996), concurrent with an increase in nonmarital cohabitation. About 20-25 percent of unmarried women aged 25-44 years were in cohabiting relationships in 1992-94.[6] At the same time, childbearing within marriage declined: births to married women declined from 4 million in 1960 to 2.7 million in 1996 and the birth rate for married women fell from 157 per thousand in 1960 to 84 per thousand in 1996.[7]

*Bullets contain references to data that can be found in Table POP6 on page 69. Endnotes begin on page 57.*

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# Data Needed

## Population and Family Characteristics

Current data collection systems do not provide complete background information on children's lives, their families, and their caregivers. Better information is needed to provide a more complete picture of where, how, and with whom children spend their time. In particular, more data are needed on:

- *Children's living arrangements.* Understanding the family structures in which children live, and the relationships of these structures to child well-being, is basic, yet there are no regular data which describe in detail the various arrangements in which children of all ages live. Better data are needed on how many children live with biological parents, step-parents, adoptive parents, etc. Information is also needed about children's interactions with non-resident parents, particularly fathers, and about the establishment of paternity.
- *Child care data for all ages and types of care, regardless of parents' working status.* Although there are several sources of information on child care arrangements for young children, currently data for children of all ages in all types of care and with working as well as non-working parents are available only sporadically (see special feature, this report). Within the next few years, these data are expected to be available from the Survey of Income and Program Participation and to be included in this report.
- *Time use.* A regular source of data is needed to track how and where children spend their time, and how these patterns change over time. For example, data on how much time children spend interacting with one or both parents, in school, in day care, in after-school activities, or at work per week would provide valuable insight into how children use their time. Currently, federal surveys collect information on the amount of time children spend on certain activities, such as watching TV, but no regular data source exists that examines time spent on the whole spectrum of children's activities. Time use studies are currently being developed by several member agencies of the Federal Interagency Forum on Child and Family Statistics.

# Indicators of Children's Well-Being

## Economic Security Indicators

Part II: *Indicators of Children's Well-Being* contains data on key indicators that measure the health, security, and safety of the environment in which children play, learn, and grow. Unlike the data presented in Part I of the report, which simply describe the changed context in which children are growing, the data series in Part II offer insight into how well American children are growing by providing information in four key areas of child well-being: economic security, health, behavior and social environment, and education..

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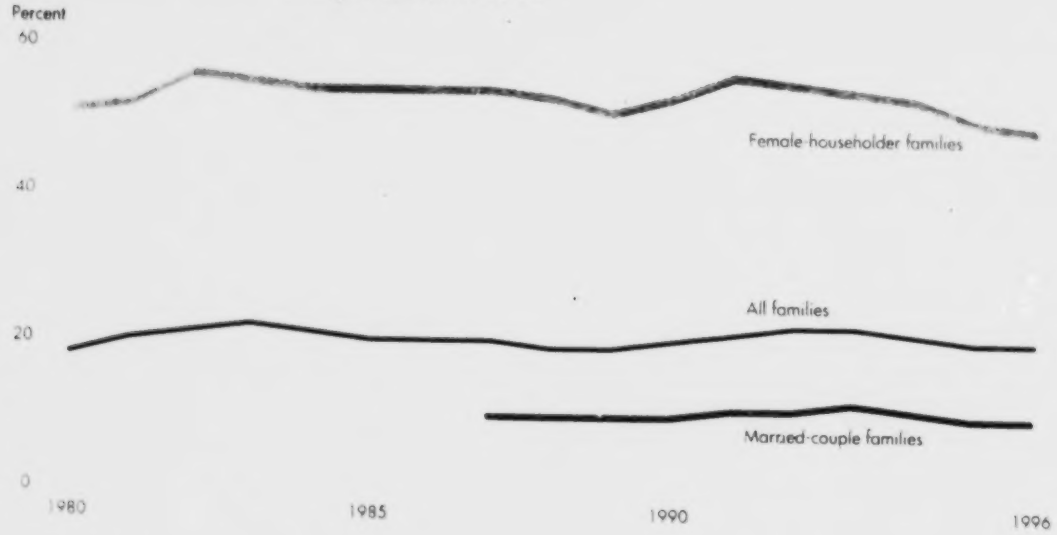
# Child Poverty and Family Income

Childhood poverty has both immediate and lasting negative effects. Children in low-income families fare more poorly than children in more affluent families for many of the indicators presented in this report, including indicators in the areas of economic security, health, and education. Children living in families who are poor are more likely than children living in other families to have difficulty in school,[8] to become teen parents[9] and, as adults, to earn less and be unemployed more.[10] The child poverty rate provides important information about the percentage of U.S. children whose current life circumstances are hard and whose futures are potentially limited as a result of their family's low income.

**Indicator ECON1.A** **Percentage of children under age 18 in poverty by family structure, 1980-96**

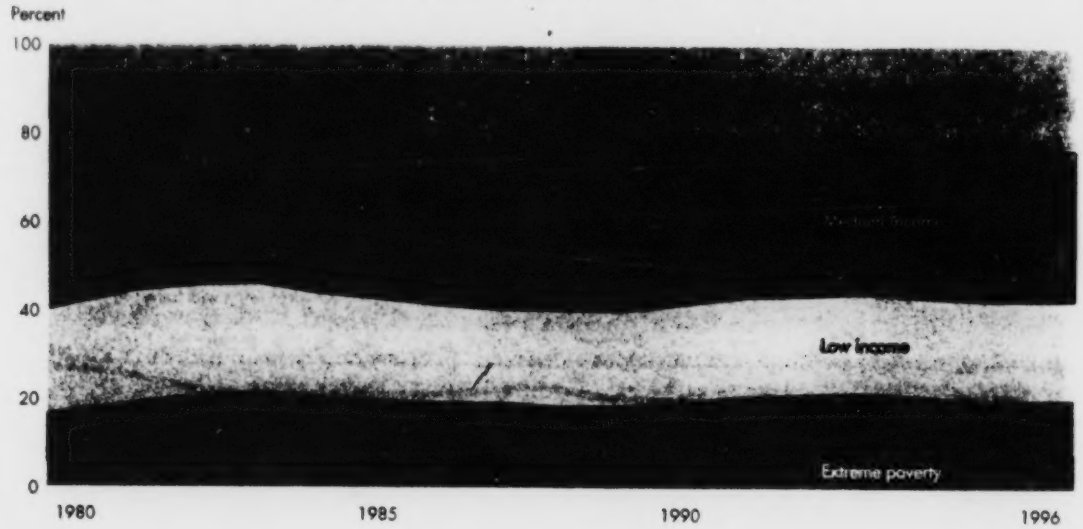



NOTE: Estimates refer to children who are related to the householder and who are under age 18. In 1996, a family of four with an annual income below $16,036 was below the Federal poverty line.
SOURCE: U.S. Bureau of the Census, March Current Population Survey.

- In 1996, 20 percent of American children lived in families with cash incomes below the poverty line.
- The percentage of children in poverty has stayed near or slightly above 20 percent since 1981.[11]
- Children under age 6 are more often found in families with incomes below the poverty line than children ages 6 to 17. In 1996, 23 percent of children under age 6 lived in poverty, compared to 18 percent of older children.
- Children with two married parents are much less likely to be living in poverty than children living only with their mothers. In 1996, 10 percent of children in two-parent families were living in poverty, compared to 49 percent in female-householder families.
- This contrast by family structure is especially pronounced among certain racial and ethnic minorities. For example, in 1996, 14 percent of black children in married-couple families lived in poverty, compared to 58 percent of black children in female-householder families. Twenty-nine percent of Hispanic children in married-couple families lived in poverty, compared to 67 percent in female-householder families.
- Most children in poverty are white and non-Hispanic. However, the proportion of black or Hispanic children in poverty is much higher than the proportion for white, non-Hispanic children. In 1996, 10 percent of white, non-Hispanic children lived in poverty, compared to 40 percent of black children and 40 percent of Hispanic children.
- In 1996, 8 percent of all children lived in families with incomes less than half the poverty level, or $8,018 a year for a family of four, while 31 percent of children lived in families with incomes less than 150 percent of the poverty level, or $24,054 a year for a family of four.

The full distribution of the income of children's families is important, not just the percentage in poverty. Knowing that more and more children live in affluent families tells us that a growing proportion of America's children enjoy economic well-being. The growing gap between rich and poor children suggests that poor children may experience more relative deprivation even if the percentage of poor children is holding steady.

**Indicator ECON1.B** **Income distribution: Percentage of children under age 18 by family income relative to the poverty line, 1980-96**




NOTE: Estimates refer to children who are related to the householder and who are under age 18. The income classes are derived from the ratio of the family's income to the family's poverty threshold. Extreme poverty is less than 50 percent of the poverty threshold (i.e., $8,018 for a family of four in 1996). Poverty is between 50 and 100 percent of the poverty threshold (i.e., between $8,018 and $16,036 for a family of four in 1996). Low income is between 100 and 200 percent of the poverty threshold (i.e., between $16,037 and $32,072 for a family of four in 1996). Medium income is between 200 and 400 percent of the poverty threshold (i.e., between $32,073 and $64,144 for a family of four in 1996). High income is over 400 percent of the poverty threshold.[12]
SOURCE: U.S. Bureau of the Census, March Current Population Survey

- In 1996, children living in families with medium income made up the largest share of children by income group (34 percent). There were similar percentages of children living with low income and with high income, 23 and 24 percent, respectively.
- Since 1980, the percentage of children living in families with medium income has fallen from 41 percent to 34 percent in 1996, while the percentage of children living in families with high income and the percentage of children in extreme poverty have risen, from 17 to 24 percent and from 7 to 8 percent, respectively. The data indicate that there has been an increase in income disparity among children.

*Bullets contain references to data that can be found in Tables ECON1.A and ECON1.B on pages 70 and 71. Endnotes begin on page 57.*

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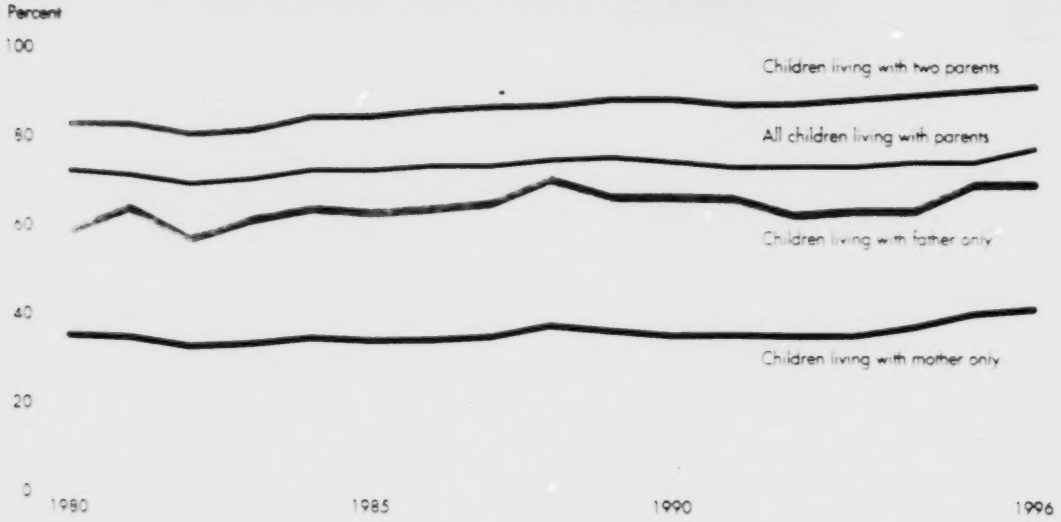
# Secure Parental Employment

Secure parental employment reduces the incidence of poverty and its attendant risks to children. Since most parents obtain health insurance for themselves and their children through their employers, a secure job can also be a key variable in determining whether children have access to health care. Secure parental employment may also enhance children's psychological well-being and improve family functioning by reducing stress and other negative effects that unemployment and underemployment can have on parents.[13] One measure of secure parental employment is the percentage of children living with their parents for whom one or both parents were employed full time during a given year.

**Indicator ECON2** **Percentage of children under age 18 living with parents with at least one parent employed full time all year by family structure, 1980-96**




SOURCE: U.S. Bureau of Labor Statistics, March Current Population Survey.

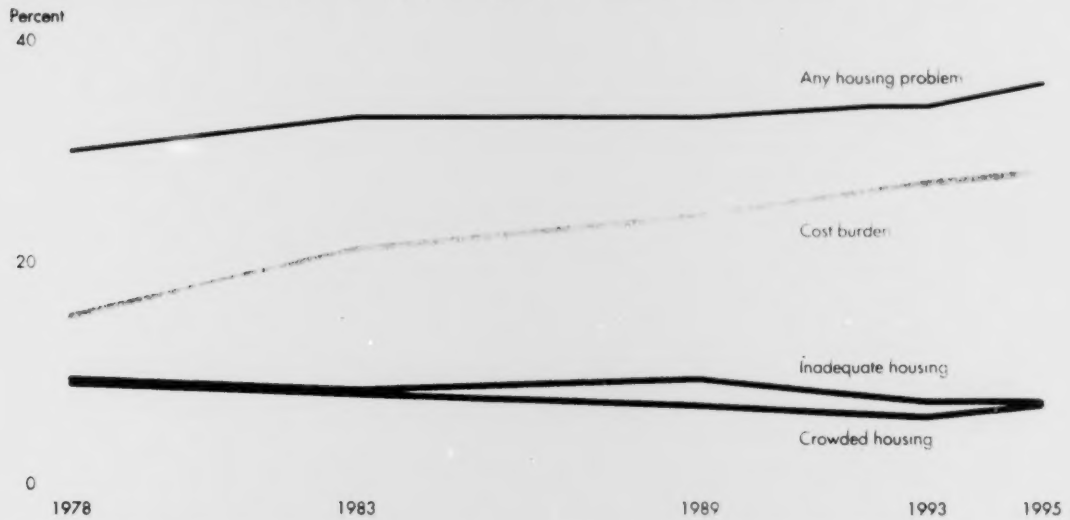
- In 1996, 75 percent of all children living with their parents had at least one parent who worked full time all year; in 1980 it was 70 percent.
- Since 1980, the trend in secure parental employment parallels the overall trend in employment, increasing between 1982 and 1989, falling during the early 1990s, and steadily increasing since 1993.
- In 1996, 88 percent of children living in two-parent families had at least one parent who was a full-time year-round worker. In contrast, 67 percent of children living with a single father and 39 percent of children living with a single mother had a parent who worked full time all year.
- Black and Hispanic children are less likely than white children to have a parent working full time all year. In 1996, 56 percent of blacks and 64 percent of Hispanics had a full-time full-year working parent, compared to 79 percent of whites.
- Children living in poverty are much less likely to have a parent working full time all year than children living at or above the poverty line, 25 percent and 87 percent, respectively. For children living with both parents, 48 percent of poor children had at least one parent working full time all year compared to 92 percent of children living above poverty.
- Since 1980, the proportion of two-parent families in which both the mother and father worked all year full time increased from 17 percent to 30 percent in 1996.

*Bullets contain references to data that can be found in Table ECON2 on page 72. Endnotes begin on page 57.*

## Housing Problems

Inadequate, crowded, or costly housing can pose serious problems to children's physical, psychological, or material well-being.[14] The percentage of households with children who report that they are living in physically inadequate,[15] crowded, and/or costly housing provides an estimate of the percentage of children whose well-being may be affected by their family's housing.

**Indicator ECON3** **Percentage of households with children under age 18 that report housing problems by type of problem, selected years 1978-95**




SOURCE: U.S. Bureau of the Census and the Department of Housing and Urban Development, Annual Housing Survey and American Housing Survey. Tabulated by U.S. Department of Housing and Urban Development.

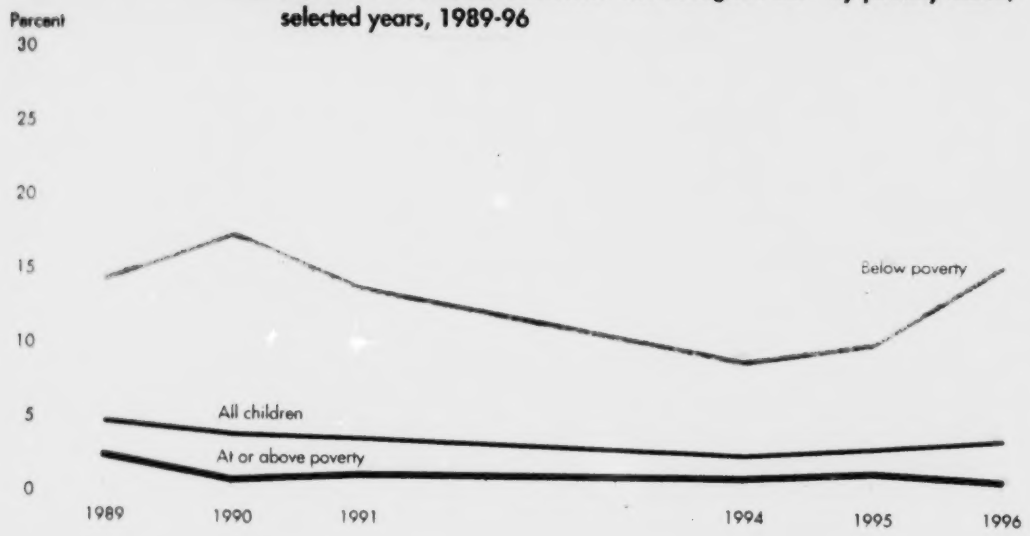
- In 1995, 36 percent of U.S. households with children, both owners and renters, had one or more of three housing problems: physically inadequate housing, crowded housing, or housing that cost more than 30 percent of household income.[16]
- The share of U.S. households with children who have any housing problems has been rising since 1978, increasing from 30 percent in 1978 to 36 percent in 1995.
- Inadequate housing, defined as housing with severe or moderate physical problems, has become slightly less common. In 1995, 7 percent of households with children had inadequate housing, compared to 9 percent in 1978.
- Crowded housing, defined as housing in which there is more than one person per room, has also declined slightly among households with children, from 9 percent in 1978 to 7 percent in 1995.
- Improvements in housing conditions, however, have been accompanied by rising housing costs. Between 1978 and 1995, the percentage of households with children with a cost burden, that is, paying more than 30 percent of their income for housing, rose from 15 percent to 28 percent. The percentage with severe cost burdens, paying more than half of income for housing, rose from 6 to 12 percent.
- In 1995, 12 percent of households with children had severe housing problems, defined as either severe housing cost burdens or severe physical housing problems among those not receiving rental assistance.[17] This increase from 8 percent in 1978 reflects a rise in the percentage of families reporting severe rent burdens.
- Severe housing problems are especially prevalent among very-low-income renters.[18] In 1995, 32 percent of very-low-income renter households with children reported severe housing problems, with severe rent burden again the major problem. Although this percentage does not differ significantly from 1978, the number of these households has grown sharply, from 1.4 million in 1978 to 2.1 million in 1995, and the proportion with severe rent burdens has increased.

*Bullets contain references to data that can be found in Table ECON3 on page 74. Endnotes begin on page 57.*

# Food Security

Children's good health and development depend on a diet sufficient in nutrients and calories. Food security has been defined as access at all times to enough nourishment for an active, healthy life. At a minimum, food security includes the ready availability of sufficient, nutritionally adequate and safe food, and the assurance that families can obtain adequate food without relying on emergency feeding programs or resorting to scavenging, stealing, or other desperate efforts to secure food.[19] A family's ability to provide for children's nutritional needs is linked to income or other resources. One measure of food security is the percentage of children in households that report that they sometimes or often do not have enough to eat.

**Indicator ECON4.A** **Food security: Percentage of children under age 18 in households reporting that there is sometimes or often "not enough to eat" by poverty status, selected years, 1989-96**

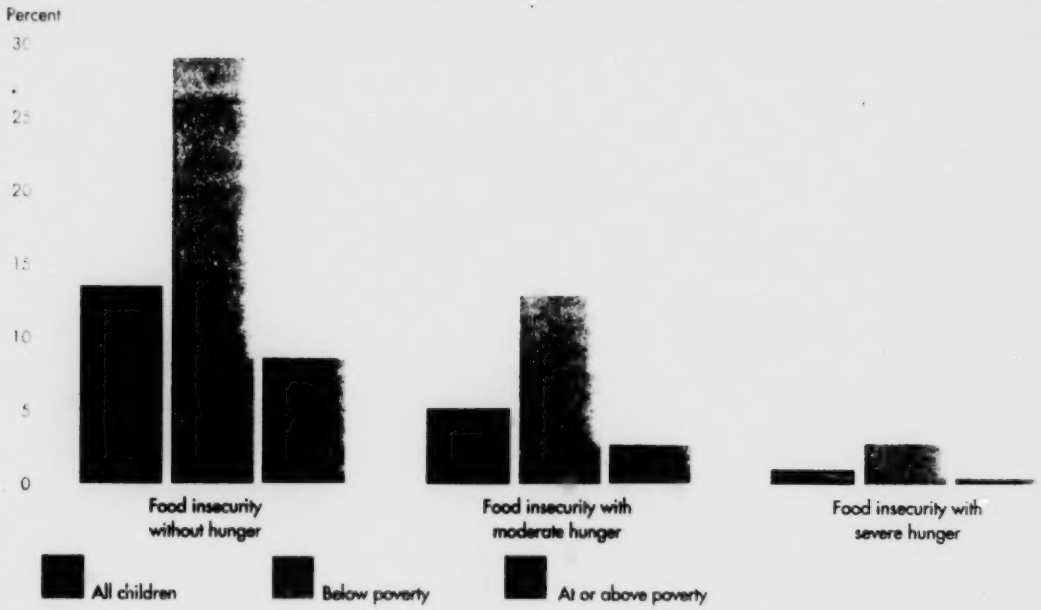



SOURCE: U.S. Department of Agriculture, Agriculture Research Service, Continuing Survey of Food Intakes by Individuals.

- In 1996, 3.4 percent of all children lived in households reporting that they sometimes or often did not have enough to eat, slightly more than the 1995 level.
- Children living in households below poverty are much more likely than other children to live in households that sometimes or often do not have enough to eat. In 1996, 15 percent of children in poor households lived in households reporting that they sometimes or often did not have enough to eat, compared to less than 1 percent of children in households with incomes at or above poverty.
- From 1989 to 1991, between 14 and 17 percent of children in poor households lived in households that reported that they sometimes or often did not have enough to eat. This percentage decreased to 9 percent in 1994, but increased to 15 percent in 1996.

Members of food-insecure households are at risk of hunger. The following indicator measures food insecurity on a scale that indicates increasing levels of severity of food insecurity and accompanying hunger. Food-insecure households without hunger report having difficulty obtaining enough food, reduced quality of diets, anxiety about their food supply, and increased resort to emergency food sources and other coping behaviors, but do not report hunger to a significant degree. However, food-insecure households with moderate and severe hunger report food insecurity and hunger with increasing levels of severity.

**Indicator ECON4.B** **Food security: Percentage of children under age 18 in households experiencing food insecurity by level of hunger and poverty status, 1995**




NOTE: See Table ECON4.B for details on the food security scale.
SOURCE: U.S. Bureau of the Census, Food Security Supplement to the Current Population Survey; U.S. Department of Agriculture, Food and Nutrition Service, Office of Analysis and Evaluation.

- In 1995, 6 percent of children lived in households experiencing food insecurity with moderate or severe hunger. Five percent experienced food insecurity with moderate hunger and 1 percent experienced severe hunger.
- Children living in households below poverty are much more likely than others to live in households experiencing food insecurity with moderate to severe hunger. In 1995, 15.6 percent of children in households with incomes below the Federal poverty level experienced food insecurity with moderate to severe hunger, compared to 3 percent of children in households with income above the poverty level.
- Most food-insecure households do not report actual hunger for household members. In 1995, 13.4 percent of all children and 29 percent of poor children lived in households experiencing food insecurity without hunger evident.
- The number of children who actually experience hunger themselves, even though they may live in a food-insecure household where one or more family members experience hunger, is believed to be significantly smaller than the total number of children living in such households. This is because in most such households the adults go without food, if necessary, in order that the children will have food.

*Bullets contain references to data that can be found in Tables ECON4.A and ECON4.B on page 75. Endnotes begin on page 57.*

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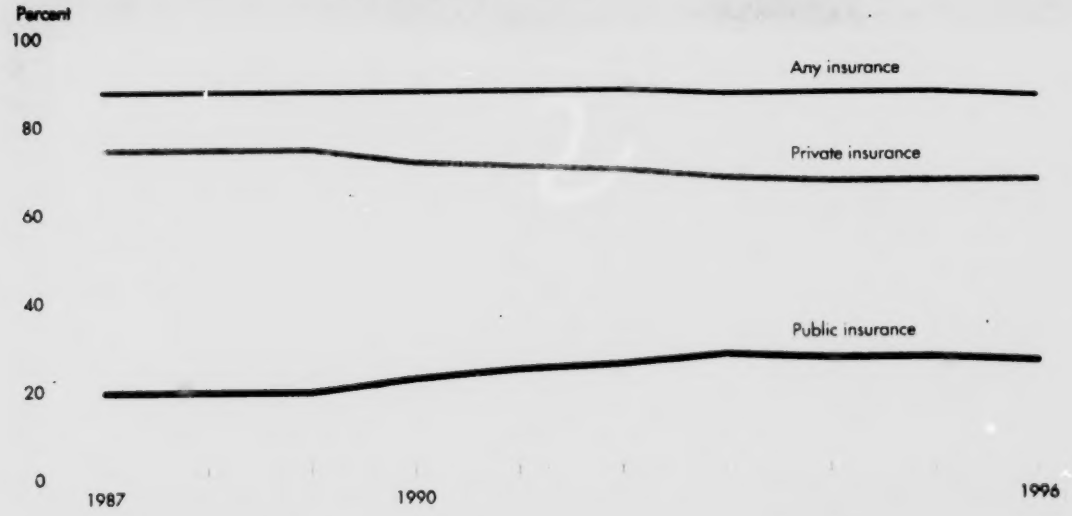
## Access to Health Care

Children with access to health care have reasonable assurance of obtaining the medical and dental attention needed to maintain their physical well-being. Access involves both the availability of a regular source of care and the ability of the child's family, or someone else, to pay for it. Children with health insurance (public or private) are much more likely than children without insurance to have a regular and accessible source of health care. The percentage of children with health insurance coverage at least part of the year is one measure of the extent to which families can obtain health care for a sick or injured child.

**Indicator ECON5.A** **Percentage of children under age 18 covered by health insurance by type of insurance, 1987-96**

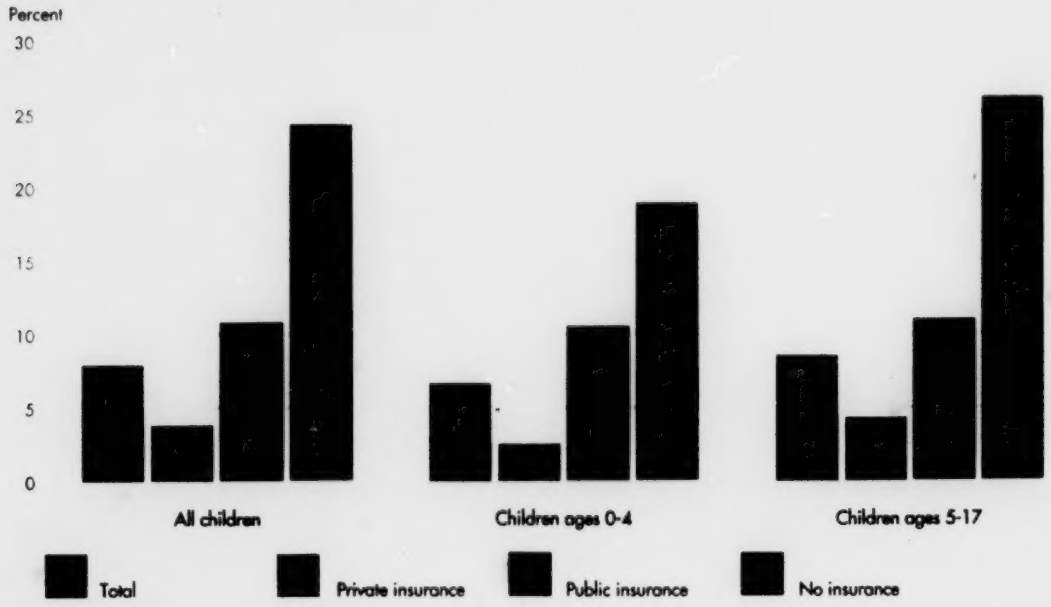



NOTE: Public health insurance for children consists primarily of Medicaid, but also includes Medicare and CHAMPUS (Civilian Health and Medical Program of the Uniformed Services). CHAMPUS is a health benefit program for all members of the armed forces and their dependents. It will be replaced by Tricare.
SOURCE: U.S. Bureau of the Census, Housing and Household Economic Statistics Division, March Current Population Survey.

- In 1996, 85 percent of children had health insurance coverage. This percentage has been fairly stable since 1987.
- The number of children who had no health insurance at any time during 1996 grew to 10.6 million (15 percent of all children). Both the number and the percent of uninsured children were higher than the 1995 figures of 9.8 million and 14 percent.
- The proportion of children covered by private health insurance has decreased in recent years, from 74 percent in 1987 to 66 percent in 1996. During the same period, the proportion of children covered by public health insurance[20] has grown from 19 percent to 25 percent.[21]
- Hispanic children are less likely to have health insurance than either white or black children. In 1996, 71 percent of Hispanic children were covered by health insurance, compared to 86 percent of white children and 81 percent of black children.
- Overall rates of coverage vary little by age of child, but young children ages birth to 5 are more likely than older children to have public rather than private health insurance.

The health of children depends at least partially on their access to health services. Health care for children includes physical examinations, preventive interventions and education, observations, screening, and immunizations, as well as sick care.[22] Having a usual source of care—a particular person or place a child goes for sick and preventive care—facilitates the timely and appropriate use of pediatric care.[23,24] Emergency rooms are excluded here as a usual source of care because their focus on emergency care generally excludes the other elements of health care.[25]

**Indicator ECON5.B** **Percentage of children under age 18 with no usual source of health care by age and type of health insurance, 1995**




NOTE: Emergency rooms excluded as a usual source of care.
SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey, 1995.

- In 1995, 8 percent of children had no usual source of health care, according to their parents.
- Children with no health insurance are much more likely to have no usual source of care than children who have health insurance. Those with private insurance more often have a usual source of care than those with public (usually Medicaid) insurance. Children without health insurance were over six times as likely as those with private insurance to have no usual source of care in 1995.
- Older children are slightly more likely than younger children to lack a usual source of health care. Most of this difference is due to adolescents ages 12 to 17 lacking a usual source of care.

*Bullets contain references to data that can be found in Tables ECON5.A and ECON5.B on pages 76 and 77. Endnotes begin on page 57.*

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# Indicators Needed

## Economic Security

This year's report presents improved data on a key area of economic security, food security. These data provide additional insight into the level and pervasiveness of food insecurity and hunger for households with children and fill a need identified in last year's report. Currently, better economic security data are needed on:

- *Economic security measures.* Changes in children's economic well-being over time need to be anchored in an average standard of living context. Multiple measures of family income, or consumption, some of which might incorporate estimates of various family assets, could produce more reliable estimates of changes in children's economic well-being over time.
- *Long-term poverty for families with children.* Although good data are available on child poverty (see ECON1, child poverty and family income), the surveys that collect these data do not capture information on long-term poverty. Since long-term poverty can have serious negative consequences for children's well-being, better data are needed in this area. The percentage of children who experience long-term poverty can be estimated from changes to surveys or changes to analyses and presentation of data from longitudinal surveys, but changes to current surveys would be needed to provide the capacity to produce regular estimates.
- *Homelessness.* At present, there are no regular data on the number of homeless children in the United States, although there have been occasional studies that have sought to estimate this number. Further work is needed in this area.

# Indicators of Children's Well-Being

## Health Indicators



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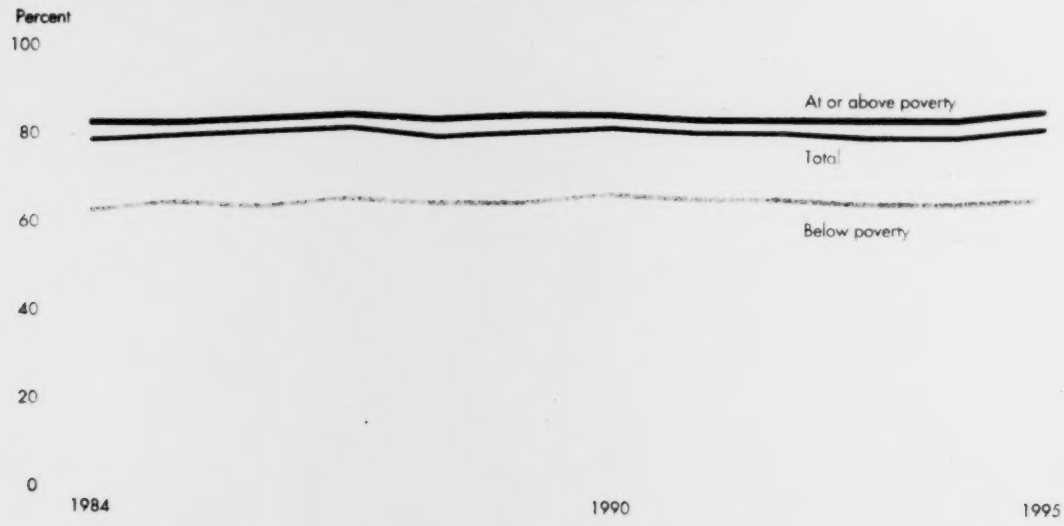
# General Health Status

The health of children and youth is basic to their well-being and optimal development. Parental reports of their children's health provide one indication of the overall health status of the Nation's children. This indicator measures the percentage of children whose parents report them to be in very good or excellent health.

**Indicator HEALTH1** **Percentage of children under age 18 in very good or excellent health by poverty status, 1984-95**




SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey.

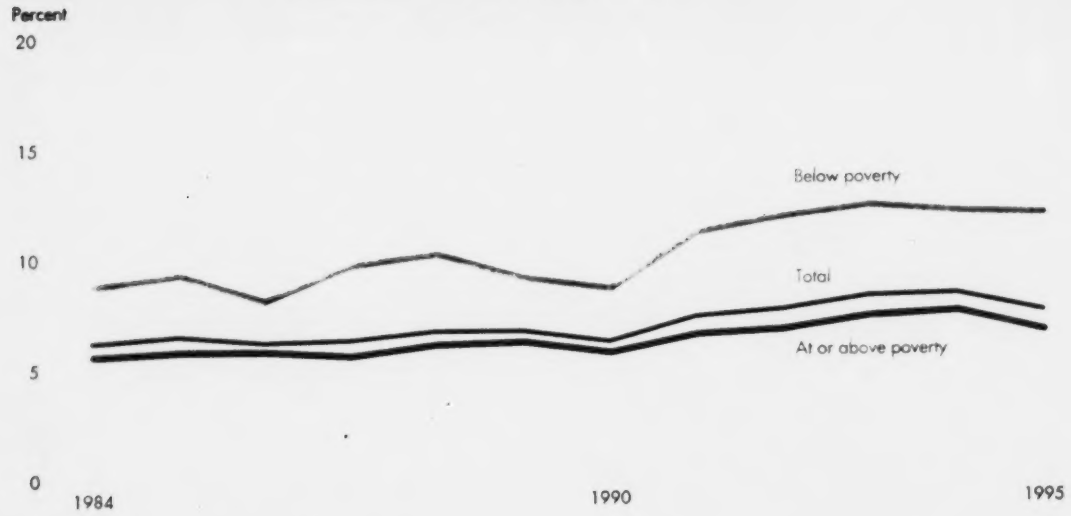
- In 1995, about 81 percent of children were reported by their parents to be in very good or excellent health.
- Child health varies by family income. As family income increases, the percentage of children in very good or excellent health increases. In 1995, about 65 percent of children in families below the poverty line were in very good or excellent health, compared with 85 percent of children in families living at or above the poverty line.
- Children under age 5 are about as likely to be in very good or excellent health as children ages 5 to 17.
- The percentage of children in very good or excellent health remained stable between 1984 and 1995. The health gap between children below and those at or above the poverty line also did not change during the time period; each year, children at or above the poverty line were about 20 percentage points more likely to be in very good or excellent health than children below poverty.

*Bullets contain references to data that can be found in Table HEALTH1 on page 78. See indicator ECON1 on pages 10 and 11 for a description of child poverty.*

# Activity Limitation

Children whose activities are limited by one or more chronic health conditions may need more specialized health care than children without such limitations. Their medical costs are generally higher; they are more likely to miss days from school; and they may require special education services.[26] Children are not classified as limited in activity unless one or more chronic conditions are reported as the cause by parents. Chronic conditions usually have a duration of more than 3 months, such as asthma, hearing impairment, or diabetes. Activities include going to school, playing, and any other activities of children.

**Indicator HEALTH2** **Percentage of children ages 5 to 17 with any limitation in activity resulting from chronic conditions by poverty status, 1984-95**




SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey.

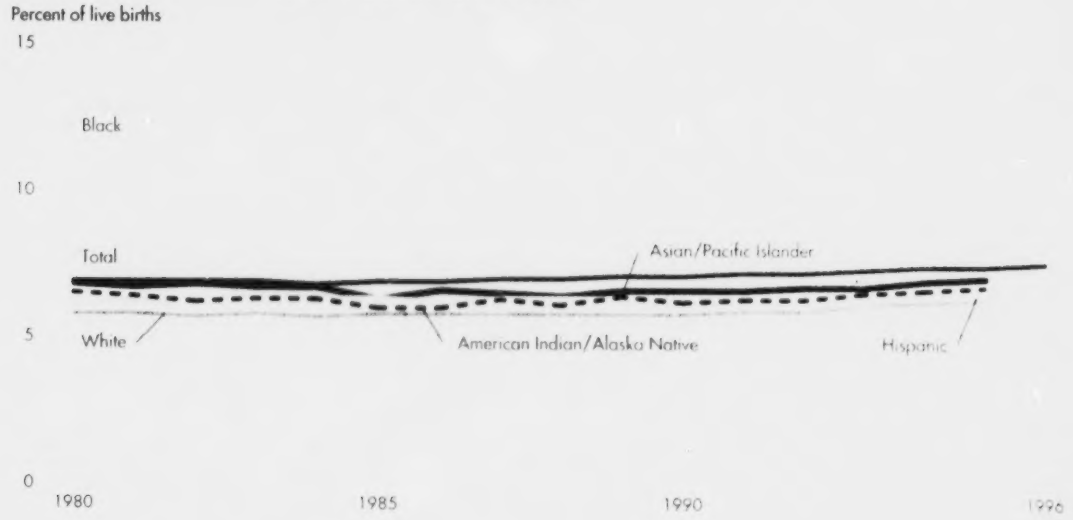
- In 1995, 7 percent of children ages 5 to 17 were limited in their activities because of one or more chronic health conditions, compared to 3 percent of children younger than 5. Children and youth ages 5 to 17 have much higher rates of activity limitation from chronic conditions than younger children, possibly because some developmental and learning disabilities are not diagnosed until children enter school.
- Children and youth in families living below the poverty line have significantly higher rates of activity limitation than children in more affluent families. Among children and youth ages 5 to 17, 12 percent of children living below poverty had activity limitation due to chronic conditions, whereas 7 percent of children in families at or above poverty had a limitation in 1995.
- Between 1984 and 1995, activity limitation increased from 9 to 12 percent among children ages 5 to 17 in families living below the poverty line, and from 6 to 7 percent among children ages 5 to 17 in families above the poverty line.
- The difference in activity limitation by income is also present among preschool-age children. Children ages birth to 4 in families below poverty had a rate of activity limitation 60 percent higher than children in families at or above poverty.
- Males ages 5 to 17 had more limitation of activity than females for all years from 1984-1995. In 1995, 9 percent of boys and 6 percent of girls were limited in their activities because of one or more chronic health conditions.

*Bullets contain references to data that can be found in Table HEALTH2 on page 79. Endnotes begin on page 57.*

# Low Birthweight

Low-birthweight infants (infants born weighing less than 2,500 grams, or about 5.5 pounds) are at higher risk of death or long-term illness and disability than are infants of normal birthweight.[27] Low-birthweight infants are a diverse group: some are born prematurely, some are full-term but small for their gestational age, and some are both premature and small.

**Indicator HEALTH3** **Percentage of infants with low birthweight by race and Hispanic origin, 1980-96**




NOTE: 1996 data are preliminary.
SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System

- The percent of infants born of low birthweight was 7.4 in 1996, according to preliminary data, up slightly from 7.3 percent in 1995. The 1996 rate was the highest level reported since the 1970s.
- The percentage of low-birthweight infants increased from 6.8 percent in 1980 to 7.3 percent in 1994-95 and 7.4 percent in 1996.
- In 1996, 13.0 percent of black infants were of low birthweight, down slightly compared with 1995 (13.1 percent), and the lowest rate for black births since 1987. The low birthweight rate rose slightly since 1995 for white infants, from 6.2 to 6.3 percent in 1996, and was unchanged for Hispanic infants at 6.3 percent. The rate of low birthweight for American Indian or Alaska Native infants was 6.6 percent and the overall rate for Asian or Pacific Islander infants was 6.9 percent in 1995, the most recent information available.
- The percentage of low-birthweight births varies widely within Hispanic and Asian or Pacific Islander subgroups. Final statistics for 1995 indicate that among Hispanics, women of Mexican origin had the lowest percentage of low birthweight infants (5.8 percent) and Puerto Ricans the highest (9.4 percent). Among Asian and Pacific Islanders, low birthweight was lowest for births to women of Chinese origin (5.3 percent) and highest for women of Filipino origin (7.8 percent).
- About 1.3 percent of infants were born with very low birthweight (less than 1,500 grams) in 1993-95, up from 1.2 percent in 1983-85.[28]

*Bullets contain references to data that can be found in Table HEALTH3 on page 80. Endnotes begin on page 57.*

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# Infant Mortality

Infant mortality is defined as the death of an infant before his or her first birthday. The infant mortality rate is an important measure of the well-being of infants, children, and pregnant women because it is associated with a variety of factors, such as maternal health, quality and access to medical care, socioeconomic conditions, and public health practices.[29] In the United States, about two-thirds of infant deaths occur in the first month after birth and are due mostly to health problems of the infant or the pregnancy, such as early delivery or birth defects. About one-third occur after the first month and are influenced greatly by social or environmental factors, such as exposure to cigarette smoke or access to health care.[30]

**Indicator HEALTH4** **Infant mortality rate by race, 1980-96**

NOTE: 1996 data are preliminary.
SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System.

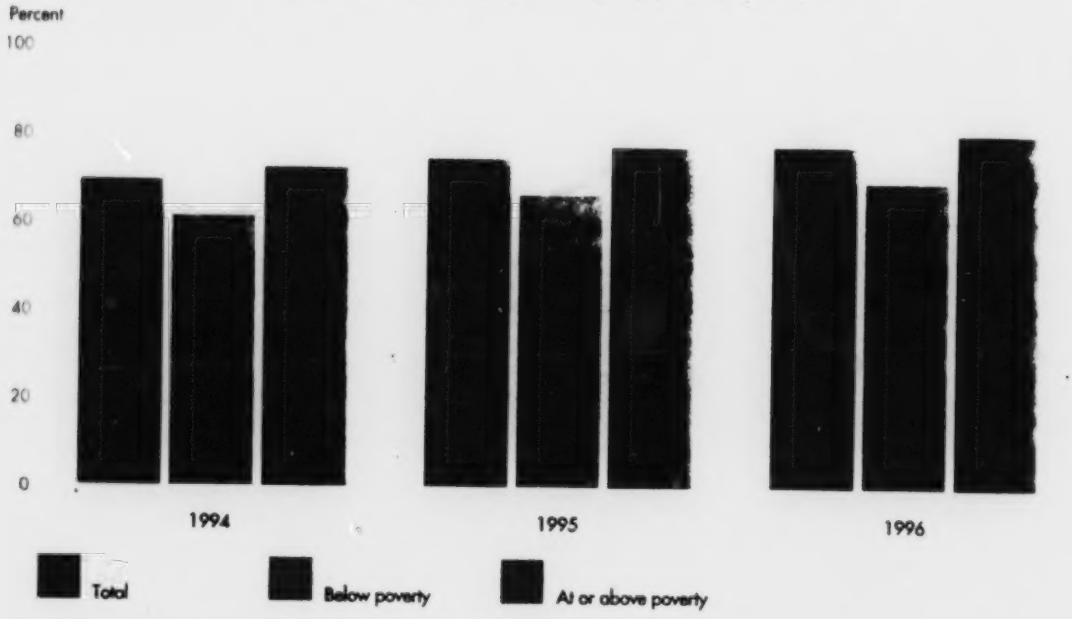
- The 1996 infant mortality rate[31] for the United States, according to preliminary data, was 7.2 deaths per 1,000 births, slightly below the 1995 rate[32] of 7.6 and substantially below the 1980 rate of 12.6.
- Blacks have consistently had a higher infant mortality rate than whites. In 1996, the black infant mortality rate was 14.2, compared to 6.0 for whites.
- Infant mortality has dropped for both blacks and whites since 1980, but there is still a substantial gap between the two. In 1996, the black infant mortality rate was 2.4 times higher than the white infant mortality rate.
- Infant mortality rates[33] vary greatly across other racial and ethnic groups as well, ranging from 5.3 among Asian or Pacific Islander infants and 6.3 for Hispanics, to 9.0 among American Indians or Alaska Natives.
- Infant mortality rates also vary within populations often considered as a single ethnic group. For example, among Hispanics in the United States, the infant mortality rate ranged from a low of 5.3 for infants of Cuban origin to a high of 8.9 for Puerto Ricans. Among Asians and Pacific Islanders, infant mortality rates ranged from 3.8 for infants of Chinese origin to 6.5 for Hawaiians.

*Bullets contain references to data that can be found in Tables HEALTH4.A and HEALTH4.B on page 81. Endnotes begin on page 57.*

# Childhood Immunization

Adequate immunization protects children against several diseases that killed or disabled many children in past decades. Rates of childhood immunization are one measure of the extent to which children are protected from serious preventable illnesses. The combined series immunization rate measures the extent to which children have received four key vaccination series.

**Indicator HEALTH5** Combined series immunization coverage among children 19 to 35 months of age by poverty status, 1994-96




NOTE: Vaccinations included in the combined series are 4 doses of diphtheria-tetanus-pertussis (DTP) vaccine, 3 doses of polio vaccine, 1 dose of a measles-containing vaccine, and 3 doses of Haemophilus influenzae type b (Hib) vaccine.
SOURCE: Centers for Disease Control and Prevention, National Immunization Program, National Center for Health Statistics, and National Immunization Survey.

- In 1996, 77 percent of children ages 19 to 35 months had received the combined series of vaccines (often referred to as the 4:3:1:3 combined series).
- Children with family incomes below the poverty level were less likely to have received the combined series than children with family incomes at or above the poverty line—69 percent compared to 80 percent in 1996.
- Although coverage with the combined series increased 3 percentage points between 1995 and 1996, the gap in coverage between children in families below the poverty level and those at or above poverty remained a constant 11 percentage points.
- Ninety-two percent of children 19 to 35 months old had received at least three doses of Hib vaccine in 1996.
- Eighty-two percent of children 19 to 35 months old had received three or more doses of the Hepatitis B vaccine in 1996.
- White, non-Hispanic children were more likely to receive the 4:3:1:3 combined series of vaccines than were black, non-Hispanic or Hispanic children. Seventy-nine percent of white, non-Hispanic children ages 19 to 35 months received these immunizations compared with 74 percent of black, non-Hispanic children and 71 percent of Hispanic children.

*Bullets contain references to data that can be found in Table HEALTH5 on page 82. Endnotes begin on page 57.*

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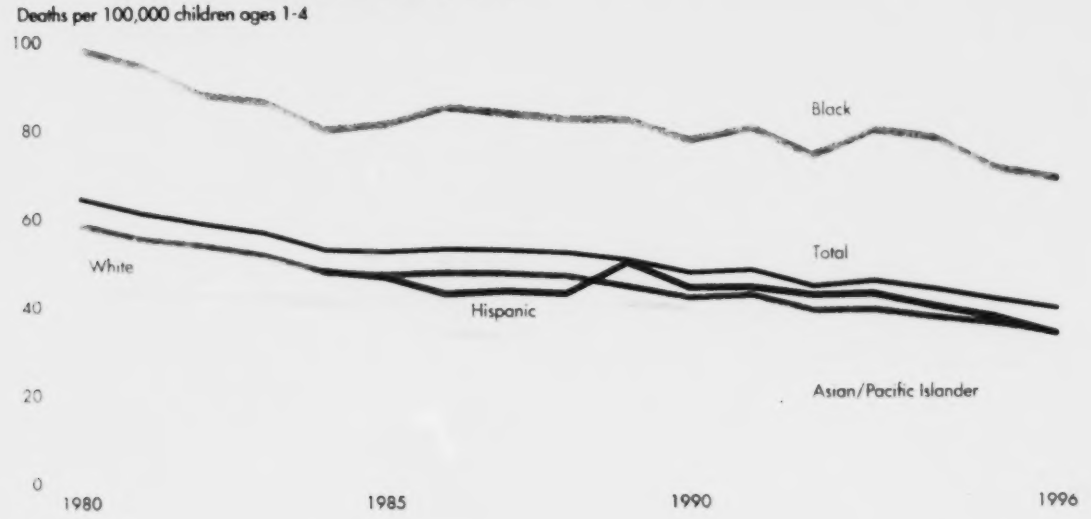
# Child Mortality

Child mortality rates are the most severe measure of ill health in children. In 1995, unintentional injuries, birth defects, and cancer were the leading causes of death among children ages 1 to 4, while at ages 5 to 14, unintentional injuries, cancer, and homicide were the leading causes of death.[34]

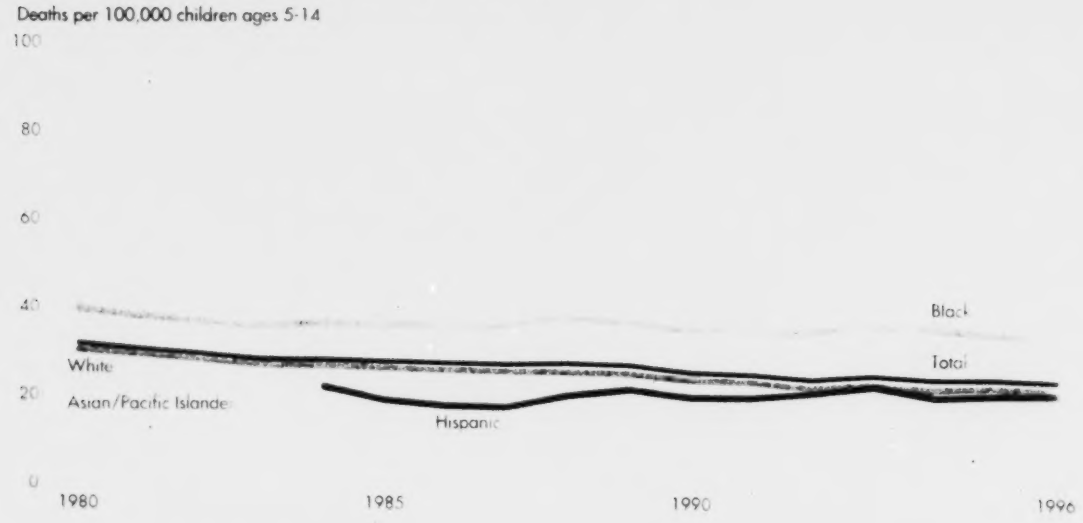
**Indicator HEALTH6.A** **Mortality rate among children ages 1 to 4 by race and Hispanic origin, 1980-96**




NOTE: Total includes American Indians and Alaska Natives. Mortality rates for American Indians and Alaska Natives are not shown separately because the numbers of deaths were too small for the calculation of reliable rates. 1996 data are preliminary.
SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System.

- In 1996, the death rate[35] for 1- to 4-year-old children was 39 per 100,000 children, according to preliminary data.
- The 1996 rate was approximately one-third lower than the 1980 death rate of 64. Declines in deaths from unintentional injury and cancer were the main causes of the overall drop in mortality.
- Among 1- to 4-year-olds, black children had the highest death rates in 1996 at 68 per 100,000 children, according to preliminary data. Asian and Pacific Islander children had the lowest death rate, at 27.

## Indicator HEALTH6.B Mortality rate among children ages 5 to 14 by race and Hispanic origin, 1980-96




NOTE: Total includes American Indians and Alaska Natives. Mortality rates for American Indians and Alaska Natives are not shown separately because the numbers of deaths were too small for the calculation of reliable rates. 1996 data are preliminary.
SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System.

- The death rate, according to preliminary data, for 5- to 14-year-old children in 1996 was 22 per 100,000 children, more than one-fourth lower than the 1980 death rate of 31. Declines in deaths from unintentional injury and cancer were the main causes of the overall drop in mortality.
- Among 5- to 14-year-olds, black children had the highest death rates in 1996 at 33 deaths per 100,000 according to preliminary data, and Asians and Pacific Islanders had the lowest death rate at 15.

*Bullets contain references to data that can be found in Table HEALTH6 on page 83. Endnotes begin on page 57.*

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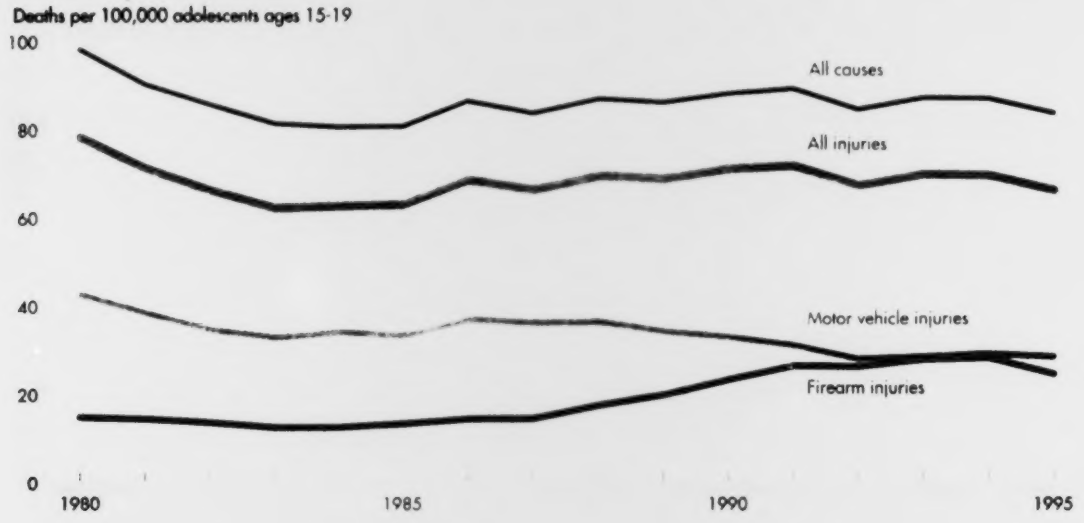
# Adolescent Mortality

Compared with younger children, adolescents have much higher mortality rates. In addition, adolescents are much more likely to die from injuries sustained from motor vehicle traffic accidents or firearms.[36] This difference illustrates the importance of looking separately at mortality rates and causes of death among 15- to 19-year-olds.

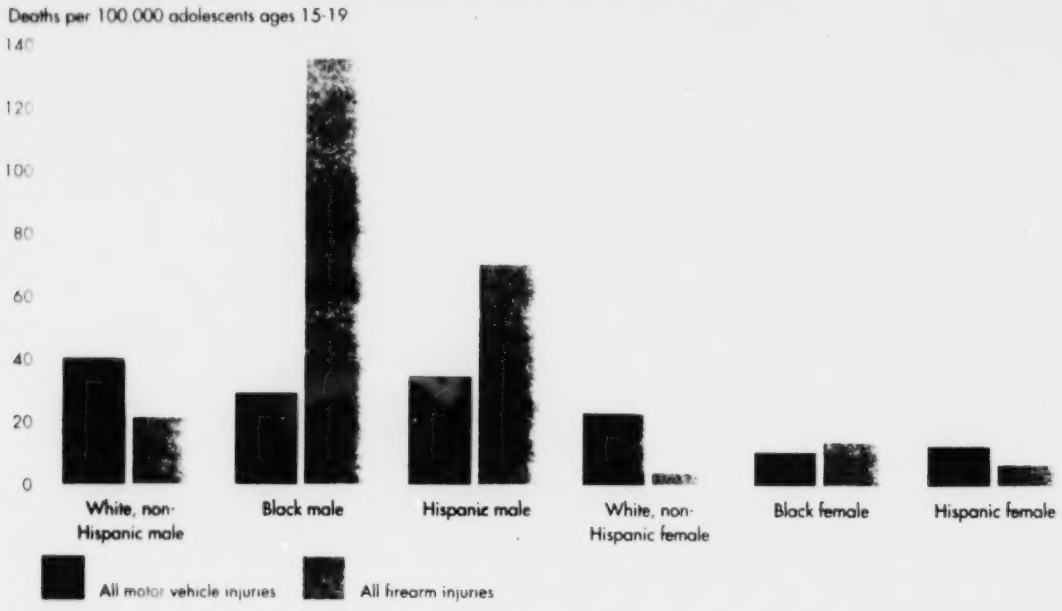
**Indicator HEALTH7.A** **Mortality rate among adolescents ages 15 to 19 by cause of death, 1980-95**




SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System.

- In 1995, the death rate for adolescents ages 15 to 19 was 84 deaths per 100,000, similar to the rate in 1987. The death rate rose to 89 in 1991 and declined again by 1995, but remains substantially lower than the 1980 rate of 98. Injury, which includes homicide, suicide, and unintentional injuries, continues to account for 4 out of 5 deaths among adolescents.
- In this age group, injuries from motor vehicles and firearms accounted for 33 and 29 percent respectively of all deaths in 1995, more than any other cause of death.
- Motor vehicle injuries were the leading cause of death among adolescents for each year between 1980 and 1995, but the death rate declined by one-third during the time period.
- In 1980, deaths to adolescents 15 to 19 resulting from motor vehicle injuries occurred almost three times as often as those resulting from firearm injuries (intentional and unintentional).
- Motor vehicle deaths to teenagers have declined steadily while firearm deaths have increased. By 1993 and 1994, the proportion of deaths from firearm injuries was almost equal to that resulting from motor vehicle traffic injuries. However, in 1995, as a result of a faster decline in the adolescent firearm injury death rate compared with the motor vehicle traffic death rate, the relative difference between the two causes rose again.
- Most of the increase in firearm injury deaths resulted from an increase in homicides. The firearm homicide rate among 15- to 19-year-olds more than tripled from 5 to 18 per 100,000 between 1983 and 1993. At the same time, the firearm suicide rate rose from 5 to 7 per 100,000.

## Indicator HEALTH7.B Injury mortality rates among adolescents ages 15 to 19 by gender, race and Hispanic origin, and type of injury, 1994-95




SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System.

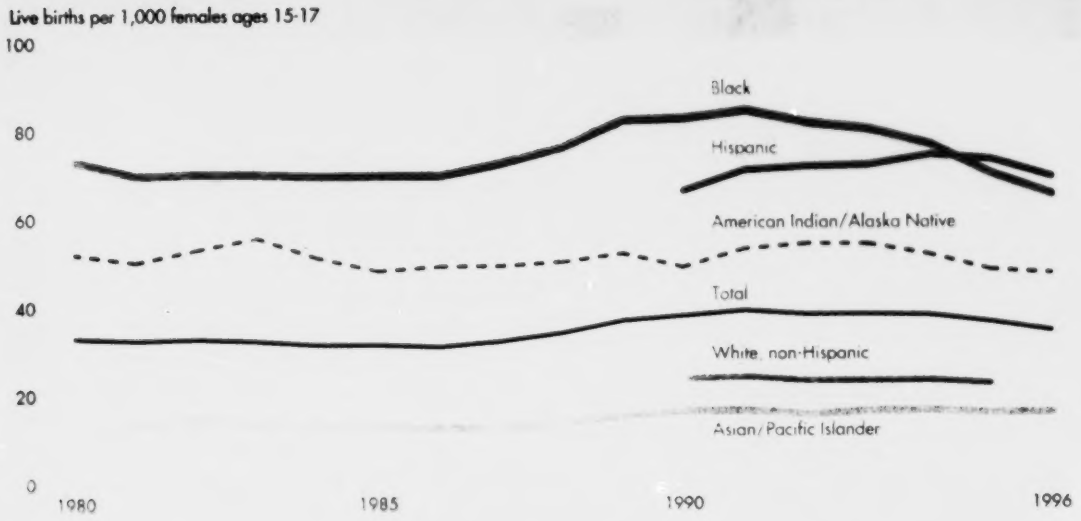
- Motor vehicle and firearm injury deaths were both more common among male than among female adolescents.
- The most common cause of death among white, non-Hispanic adolescents, both male and female, and Hispanic females, was motor vehicle injuries. Among black males and females and Hispanic males, there were more deaths from firearms than from motor vehicle injuries. Firearms were the most frequent weapon used in suicide and homicide among adolescents.

*Bullets contain references to data that can be found in Tables HEALTH 7.A and HEALTH7.B on pages 84 and 85. Endnotes begin on page 57.*

# Adolescent Births

Bearing a child during adolescence is associated with long-term difficulties for the mother, her child, and society. These consequences are often attributable to the poverty and other adverse socioeconomic circumstances that frequently accompany early childbearing.[37] Compared with babies born to older mothers, babies born to adolescent mothers, particularly young adolescent mothers, are at higher risk of low birthweight and infant mortality.[38] They are more likely to grow up in homes that offer lower levels of emotional support and cognitive stimulation, and they are less likely to earn high school diplomas. For the mothers, giving birth during adolescence is associated with limited educational attainment, which in turn can reduce future employment prospects and earnings potential.[39] The birth rate of adolescents under age 18 is a measure of particular interest because the mothers are still of school age.

**Indicator HEALTH8** **Birth rate for females ages 15 to 17 by race and Hispanic origin, 1980-96**




NOTE: Rates from 1981-1989 were not calculated for Hispanics or non-Hispanic whites because estimates for populations were not available. 1996 data are preliminary.
SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System.

- In 1996, the adolescent birth rate was 34 per 1,000 young women ages 15 to 17, according to preliminary data. There were 186,762 births to these young women in 1996.
- Birth rates among teenagers 15 to 17 years old declined from 39 to 34 births per 1,000 between 1991 and 1996. These declines follow a period of substantial increase between 1986 and 1991. During the early 1980s, the rate declined slightly.
- There are substantial racial and ethnic disparities in birth rates among young women ages 15 to 17. In 1996, the birth rate for this age group was 16 per 1,000 for Asian or Pacific Islanders, 47 for American Indian or Alaska Natives, 69 for Hispanics, and 65 for blacks. The rate for non-Hispanic whites was 22 in 1995, the most recent year for which data were available.
- Birth rates for black females ages 15 to 17 dropped by one-fourth between 1991 and 1996, after increasing by one-fifth from 1986 to 1991. The birth rate for non-Hispanic white teens has also declined. In contrast, the birth rate for Hispanics in this age group increased during the 1991-94 period, and then fell between 1994 and 1996.
- In 1996, 85 percent of births to females ages 15 to 17 were births to unmarried mothers, compared to 62 percent in 1980.[40]

*Bullets contain references to data that can be found in Table HEALTH8 on page 86. Endnotes begin on page 57.*

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# Indicators Needed

## Health

This year's report includes a measure of access to health care, filling a need for data identified in last year's report. To better track children's well-being in the health area, further work is needed to develop indicators on:

- *Disability.* Disability in children may involve limitations in mobility and physical movement, sensory and communicative ability, activities of daily living, or cognitive and mental health functions. Estimating disability is difficult, both because no single means of capturing each of its potential components has been developed and because any indicator must include measures of the severity and impact of the functional limitations, as well as the interaction of individual and environmental characteristics, such as access to health care. Moreover, reporting of disability is constrained by individual or parental perception of limitations, which may vary from person to person. The situation is further complicated both by the many definitions of disability currently in use by policy-makers who plan and administer programs to assist the disabled and by researchers who are working to better understand the phenomenon. Development of appropriate indicators of disability in children is a high priority for the members of the Federal Interagency Forum on Child and Family Statistics; collaborative research on disability indicators for children is now underway.
- *Mental health.* The development of a global indicator of mental health for children is needed to estimate the number of children with mental, emotional, and behavioral problems. This indicator would take into account the child's age and sex and elicit valid responses from all racial, ethnic, and income groups. Several efforts are underway to develop such indicators, but these data will not be available until 1999.
- *Child abuse and neglect.* Also needed are regular, reliable estimates of the incidence of child abuse and neglect that are based on sample surveys rather than administrative records. Since administrative data are based on cases reported to authorities, it is likely that these data underestimate the magnitude of the problem. Estimates based on sample survey data, however, could potentially provide more accurate information if questions can be crafted that elicit the desired sensitive information.

# Indicators of Children's Well-Being

## Behavior and Social Environment Indicators

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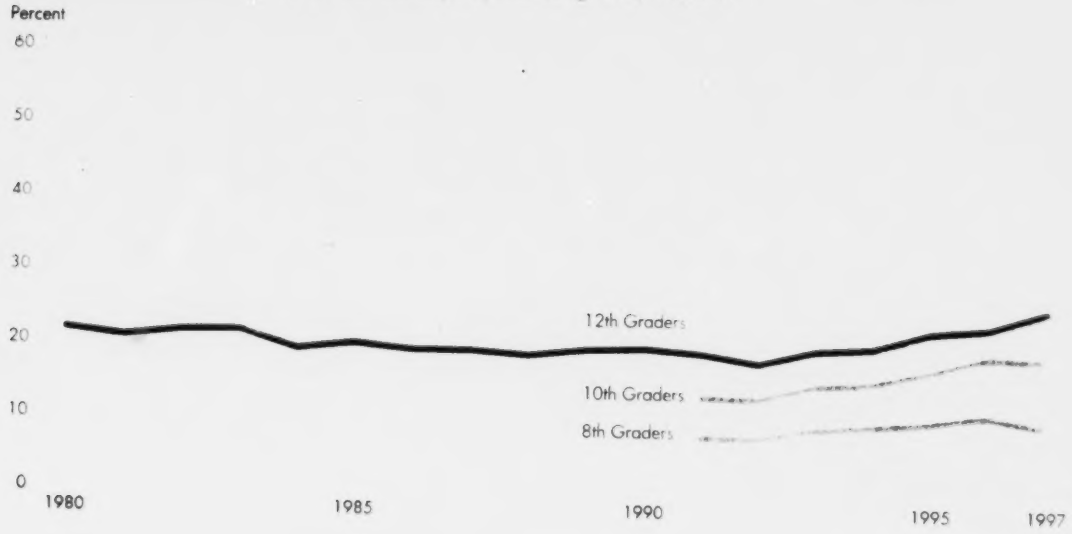
## Regular Cigarette Smoking

Smoking has serious long-term consequences, including the risk of smoking-related diseases, increased health care costs associated with treating these illnesses, and the risk of premature death.[41] Many adults who are today addicted to tobacco began smoking as adolescents, and it is estimated that more than 5 million of today's underage smokers will die of tobacco-related illnesses.[42] These consequences underscore the importance of studying patterns of smoking among adolescents.

**Indicator BEH1** **Percentage of students who reported smoking cigarettes daily in the previous 30 days by school grade, 1980-97**




SOURCE: National Institute on Drug Abuse, Monitoring the Future Survey.

- The percentage of 8th, 10th, and 12th graders who reported that they smoked cigarettes daily increased between 1992 and 1997. In 1997, 25 percent of 12th graders reported smoking daily during the previous 30 days, as did 18 percent of 10th graders and 9 percent of 8th graders.
- Prior to 1992, smoking had been decreasing among 12th graders since 1980, when 21 percent of 12th graders reported that they smoked daily. (Comparable figures are not available for 8th and 10th graders before 1991.)
- Girls are as likely as boys to report smoking on a daily basis.
- White students have the highest rates of smoking, followed by Hispanics, and then blacks. In 1996-97, 28 percent of white 12th-grade students reported daily smoking, compared to 14 percent of Hispanics and 7 percent of blacks.

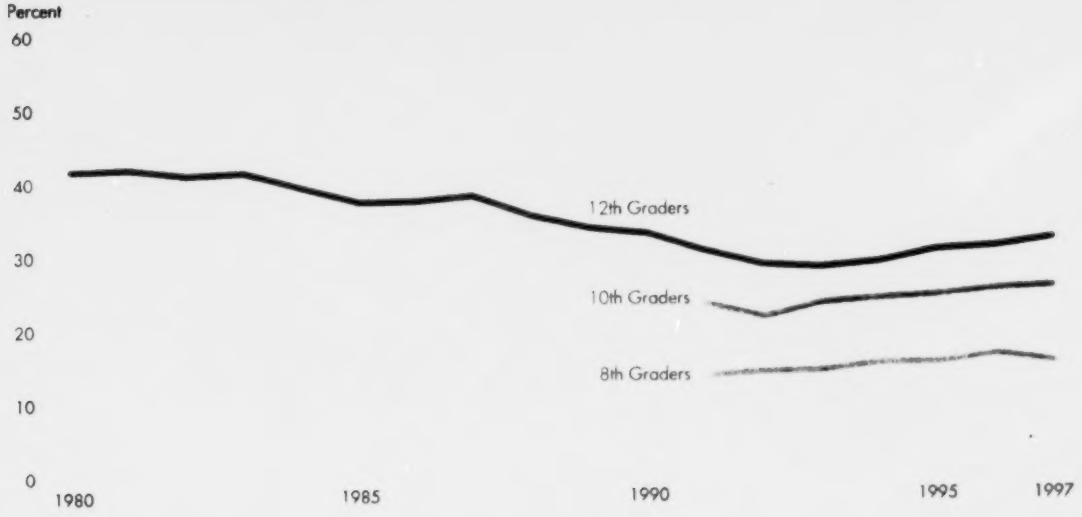
*Bullets contain references to data that can be found in Table BEH1 on page 87. Endnotes begin on page 57.*

# Alcohol Use

Alcohol use by adolescents is associated with motor vehicle accidents, injuries, and deaths; with problems in school and in the workplace; and with fighting, and crime.[43] Alcohol use by adolescents is a risk-taking behavior that can have serious consequences, with heavy drinking potentially increasing the likelihood of negative consequences. Despite alcohol's legal status as a controlled substance, it is the most commonly used psychoactive substance among adolescents.

**Indicator BEH2**

**Percentage of students who reported having five or more alcoholic beverages in a row in the last 2 weeks by grade, 1980-97**




NOTE: Heavy drinking is defined as having 5 or more alcoholic drinks in a row in the 2 weeks prior to survey.
SOURCE: National Institute on Drug Abuse, Monitoring the Future Survey.

- In 1997, almost one in three 12th graders, one in four 10th graders, and more than one in ten 8th graders reported heavy drinking, i.e., having at least five drinks in a row in the previous 2 weeks.
- For all three grade levels, the percentage of students who reported heavy drinking was higher in 1997 than in 1991, the earliest year for which data are available for 8th and 10th graders.
- Long-term trends indicate heavy drinking peaked in 1981 with 41 percent of seniors reporting this behavior. The percentage of high school seniors reporting heavy drinking then declined significantly to a low of 28 percent in 1993. Since 1993, the prevalence of this behavior has risen to 31 percent.
- Among 10th and 12th graders, boys are substantially more likely to drink heavily than are girls. In 1997, 38 percent of 12th-grade boys reported heavy drinking, compared to 24 percent of 12th-grade girls. Among 10th graders, 29 percent of boys reported heavy drinking, compared to 22 percent of 10th-grade girls.
- For the youngest students surveyed, however, boys and girls are equally likely to report heavy alcohol use. Among 8th graders in 1997, 15 percent of boys and 14 percent of girls reported heavy drinking.
- Heavy drinking appears to be much more likely for Hispanics and white secondary students as compared to their black counterparts. For example, among seniors in high school, 13 percent of blacks reported heavy drinking compared to 35 percent of whites and 28 percent of Hispanics.

*Bullets contain references to data that can be found in Table BEH2 on page 88. Endnotes begin on page 57.*

## Illicit Drug Use

Drug use by adolescents can have immediate as well as long-term health and social consequences. Cocaine use is linked with health problems that range from eating disorders to disability to death from heart attacks and strokes.[44] Marijuana use poses both health and cognitive risks, particularly for damage to pulmonary functions as a result of chronic use.[45] Hallucinogens can affect brain chemistry and result in problems with learning new information and retaining knowledge.[46] Possession and/or use of drugs is illegal and can lead to a variety of penalties and a permanent criminal record. As is the case with alcohol use, drug use is a risk-taking behavior by adolescents that has serious negative consequences.

**Indicator BEH3** **Percentage of students who have used illicit drugs in the previous 30 days by grade, 1980-97**

NOTE: Illicit drugs include marijuana, cocaine (including crack), heroin, hallucinogens (including PCP), inhalants, and non-medical use of psychotherapeutics.
SOURCE: National Institute on Drug Abuse, Monitoring the Future Survey.

- In 1997, 26 percent of 12th graders reported using illicit drugs in the previous 30 days. Twenty-three percent of 10th graders and 13 percent of 8th graders reported using illicit drugs in the previous 30 days.
- The percentage of students in each grade level reporting illicit drug use increased substantially between 1992 and 1996—from 14 to 26 percent for 12th graders; from 11 to 23 percent for 10th graders; and from 7 to 15 percent for 8th graders.
- Since 1980, illicit drug use by 12th graders had fallen from 37 percent in 1980 to 14 percent in 1992, but then began to rise sharply, reaching 26 percent in 1997. (Data for 8th and 10th graders are not available before 1991.)
- Among 12th graders, boys are more likely to use illicit drugs than girls. In 1997, 29 percent of male 12th graders reported using illicit drugs, compared to 23 percent of females.
- Twenty-six percent of white 12th graders reported illicit drug use in 1997, compared to 20 percent of black and 24 percent of Hispanic 12th graders.

*Bullets contain references to data that can be found in Table BEH3 on page 89. Endnotes begin on page 57.*

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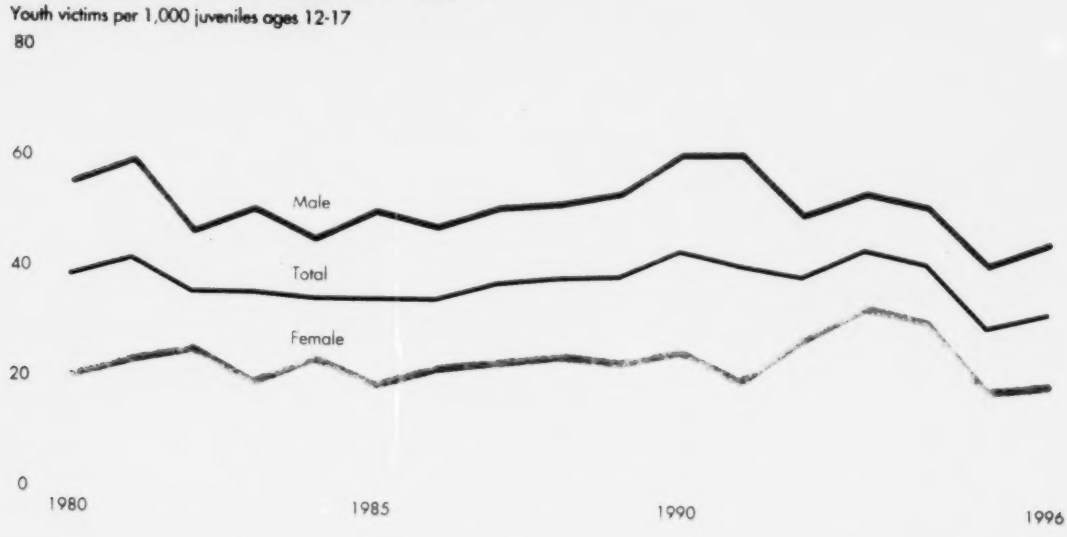
# Youth Victims and Perpetrators of Serious Violent Crimes

Violence affects the quality of life of young people who experience, witness, or feel threatened by it. In addition to the direct physical harm suffered by young victims of serious violence, serious violence can adversely affect victims' mental health and development, and increase the likelihood that they themselves will commit acts of serious violence.[47] Youth ages 12 to 17 are nearly three times more likely than adults to be victims of serious violent crimes,[48] which include aggravated assault, rape, robbery (stealing by force or threat of violence), and homicide.

**Indicator BEH4.A** **Rate of serious violent crime victimization of youth ages 12 to 17 by gender, 1980-96**

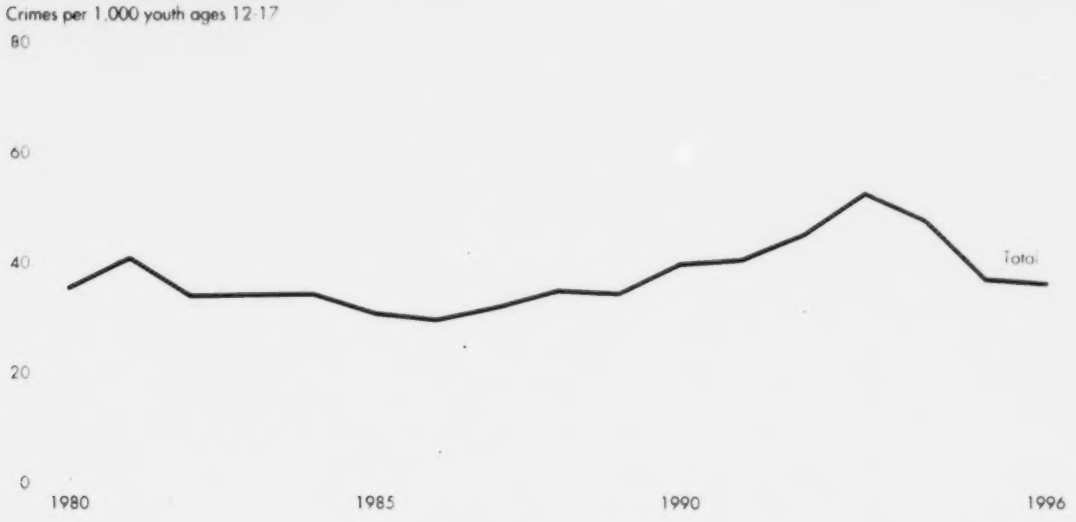



NOTE: Serious violent crimes include aggravated assault, rape, robbery (stealing by force or threat of violence), and homicide. Because of changes made in the victimization survey, data prior to 1992 are adjusted to make them comparable with data collected under the redesigned methodology.
SOURCE: U.S. Department of Justice, Bureau of Justice Statistics, National Crime Victimization Survey. Federal Bureau of Investigation, Uniform Crime Reporting Program, Supplementary Homicide Reports.

- In 1996, the rate at which youth were victims of serious violent crimes was 33 crimes per 1,000 juveniles ages 12 to 17 years old, totaling about 740,000 such crimes victimizing juveniles.
- The rate at which youth were victims of serious violent crimes fluctuated between 34 and 43 per 1,000 from 1980 to 1990, and peaked at 44 per 1,000 in 1993. Since 1993, the rate of serious violent crime against youth has decreased to 33 per 1,000 in 1996, a rate lower than the rate in 1980 of 38 per 1,000.
- Boys are much more likely than girls to be victims of serious violent crimes. In 1996, the male youth serious violent crime victimization rate was 45 per 1,000, compared to 19 per 1,000 for females.
- Younger teens (ages 12 to 14) are somewhat less likely than older teens (ages 15 to 17) to be victims of serious violent crimes. In 1996, the serious violent crime victimization rates were 29 per 1,000 for younger teens and 36 per 1,000 for older teens.

The level of youth violence in society can be viewed as an indicator of the collective failure on the part of socializing agents such as families, peers, schools, and religious institutions to supervise or channel youth behavior to acceptable norms and of youth to control their behavior. One measure of the serious violent crime committed by juveniles is the incidence rate of serious violent juvenile crime.

## Indicator BEH4.B Serious violent crime offending rate by youth ages 12 to 17, 1980-96




NOTE: This rate is the ratio of the number of crimes (aggravated assault, rape, and robbery; i.e., stealing by force or threat of violence) reported to the National Crime Victimization Survey plus the number of homicides reported to police that involve at least one juvenile offender perceived by the victim (or by law enforcement in the case of homicide) to be 12 through 17 years of age, to the number of juveniles in the population. Because of changes made in the victimization survey, data prior to 1992 are adjusted to make them comparable with data collected under the redesigned methodology.
SOURCE: U.S. Department of Justice, Bureau of Justice Statistics, National Crime Victimization Survey. Federal Bureau of Investigation, Uniform Crime Reporting Program, Supplementary Homicide Reports

- In 1996, the serious violent juvenile crime rate was 36 crimes per 1,000 juveniles ages 12 to 17 years old, totaling 805,000 such crimes involving juveniles.
- Between 1980 and 1989, the serious violent juvenile crime rate fluctuated between 29 and 40 per 1,000, and then began to increase from 34 per 1,000 in 1989 to a high of 52 per 1,000 in 1993. Since then, the rate has steadily dropped to 36 per 1,000 in 1996.
- Between 1980 and 1996, the percentage of all serious violent crime involving juveniles has ranged from 19 percent in 1982 to 26 percent in 1993, the peak year for youth violence. In 1996, 25 percent of all such victimizations involved a juvenile offender.
- In about half (53 percent) of all serious violent juvenile crimes, victims reported that more than one offender was involved in the incident.[89] Because insufficient detail exists to determine the age of each individual offender when a crime is committed by more than one offender, the number of additional juvenile offenders cannot be determined. Therefore, this rate of serious violent crime offending does not represent the number of juvenile offenders in the population, which would be a much larger number, but rather the number of crimes committed involving juveniles 12 to 17 years old in relation to the juvenile population.

*Bullets contain references to data that can be found in Tables BEH4.A and BEH4.B on pages 90 and 91. Endnotes begin on page 57.*

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# Indicators Needed

## Behavior and Social Environment

This report includes a new indicator of serious violent crime, filling a data need identified last year. Currently, better data on child and youth behavior and social environment are needed on:

- *Neighborhood environment.* Research shows that growing up in distressed neighborhoods has an effect over and above that of individual or family background characteristics on child well-being, yet an adequate and regular source of information on neighborhoods is not yet available.
- *Indicators of positive behaviors.* Indicators of positive behaviors with proven relationships to enhancing child well-being need to be developed. Examples might include participation in extra-curricular activities such as school clubs and sports, scouting, attendance in churches and synagogues, or volunteering at community organizations.
- *Youth violence.* The indicator, serious violent crime offending rate by youth ages 12 to 17, added to this year's report, provides some new information on serious violent crime by juveniles. However, this indicator cannot produce critical information on the total number and characteristics of youthful offenders involved in these crimes. Additional work is needed to produce a more comprehensive and useful measure of prevalence of violence among young people in the population.

# Indicators of Children's Well-Being

## Education Indicators

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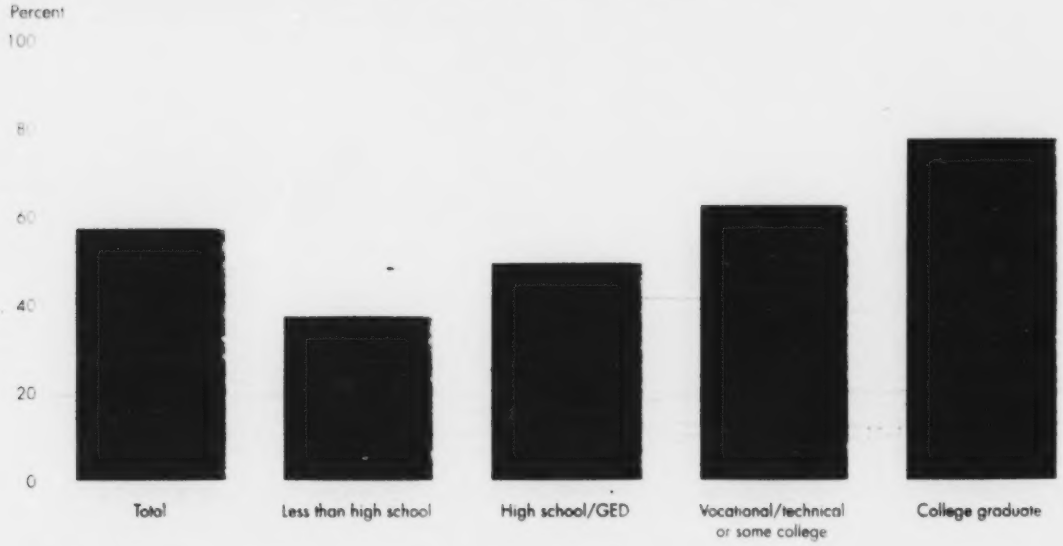
# Family Reading to Young Children

Reading to young children promotes language acquisition and correlates with literacy development and, later on, with achievement in reading comprehension and overall success in school.[50] The percentage of young children read aloud to daily by a family member is one indicator of how well young children are prepared for school.

**Indicator ED1** Percentage of children ages 3 to 5 who were read to every day by a family member by mother's education, 1996




NOTE: Estimates are based on children ages 3 to 5 who have yet to enter kindergarten.
SOURCE: U.S. Department of Education, National Center for Education Statistics, National Household Education Survey

- In 1996, 57 percent of children ages 3 to 5 were read aloud to by a family member every day in the last week, up slightly from 53 percent in 1993.
- As a mother's education increases, so does the likelihood that her child is read to every day. In 1996, about three-quarters (77 percent) of children whose mothers were college graduates were read aloud to every day. In comparison, daily reading aloud occurred for 62 percent of children whose mothers had some postsecondary experience, 49 percent whose mothers had completed high school but had no education beyond that, and 37 percent whose mothers had not completed high school.
- White, non-Hispanic children are more likely to be read aloud to every day than either black, non-Hispanic or Hispanic children. Sixty-four percent of white, non-Hispanic children, 44 percent of black non-Hispanic children, and 39 percent of Hispanic children were read to every day in 1996.
- Children in families with incomes below the poverty line are less likely to be read aloud to every day than are children in families with incomes above the poverty line. Forty-six percent of children in families in poverty were read to every day in 1996, compared to 61 percent of children in families above the poverty line.
- Children living with two parents are more likely to be read aloud to every day than are children who live with one or no parent. Sixty-one percent of children in two-parent households were read to every day in 1996, compared to 46 percent of children living with one or no parent.

*Bullets contain references to data that can be found in Table ED1 on page 92. Endnotes begin on page 57.*

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# Early Childhood Education

Like family reading, participation in an early childhood education program can provide preschoolers with skills and enrichment that can increase their chances of success in school. Studies have demonstrated that participation in high-quality early childhood education programs has short-term positive effects on IQ and achievement, and long-term positive effects on low-income minority children's school completion.[51] Until a direct measure of preschoolers' cognitive, behavioral, and social skills is available for this monitoring report, this indirect indicator monitors the percentage of children who are exposed to potentially beneficial early childhood education.

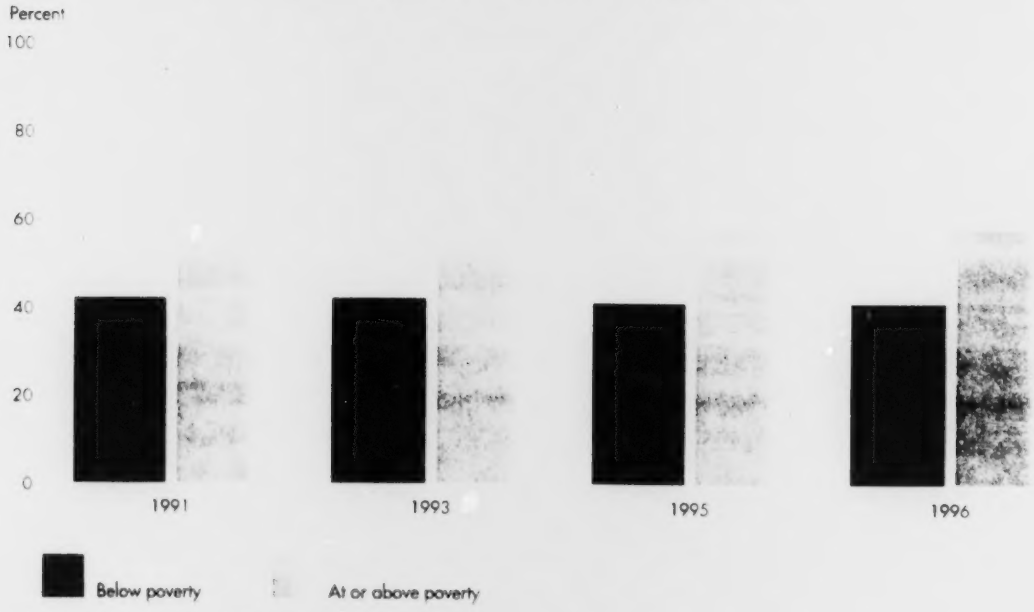
**Indicator ED2.A**

**Percentage of children ages 3 to 4 who are enrolled in preschool, 1980-96**

NOTE: Data for 1990 and 1994-96 may not be comparable with other years because of changes in survey procedures. Estimates based on children who have yet to enter kindergarten.
SOURCE: U.S. Bureau of the Census, October Current Population Surveys. Tabulated by U.S. Department of Education, National Center for Education Statistics.

- In 1996, 45 percent of children ages 3 to 4 yet to enter kindergarten attended preschool, a substantial increase from the 30 percent who attended preschool in 1980.
- When a broader group of early childhood programs are included (day care centers, nursery schools, preschool programs, Head Start programs, and prekindergarten programs), about half (53 percent) of children ages 3 to 4 yet to enter kindergarten attended one of several kinds of center-based early childhood programs in 1996.

**Indicator ED2.B** Percentage of children ages 3 to 4 who are enrolled in early childhood centers by poverty status, selected years 1991-96




NOTE: Estimates based on children who have yet to enter kindergarten.
SOURCE: U.S. Department of Education, National Center for Education Statistics, National Household Education Survey, 1996.

- Children living in poverty are less likely to attend an early childhood center than children whose families have higher incomes. In 1996, 58 percent of children ages 3 to 4 whose families had incomes at or above the poverty line were enrolled in an early childhood center, compared to 41 percent of children whose families had incomes below the poverty line. This differential has been increasing slightly since 1991.
- Children with more highly educated mothers are more likely to attend an early childhood center than others. Seventy-one percent of children whose mothers had completed college attended such programs in 1996, compared to 37 percent whose mothers had less than a high school education.
- Black, non-Hispanic children are somewhat more likely than white, non-Hispanic children and much more likely than Hispanic children to attend an early childhood center. In 1996, 63 percent of black, non-Hispanic children ages 3 to 4 attended such programs, compared to 54 percent of white children and 37 percent of Hispanic children.

*Bullets contain references to data that can be found in Tables ED2.A and ED2.B on pages 93 and 94. Endnotes begin on page 57.*

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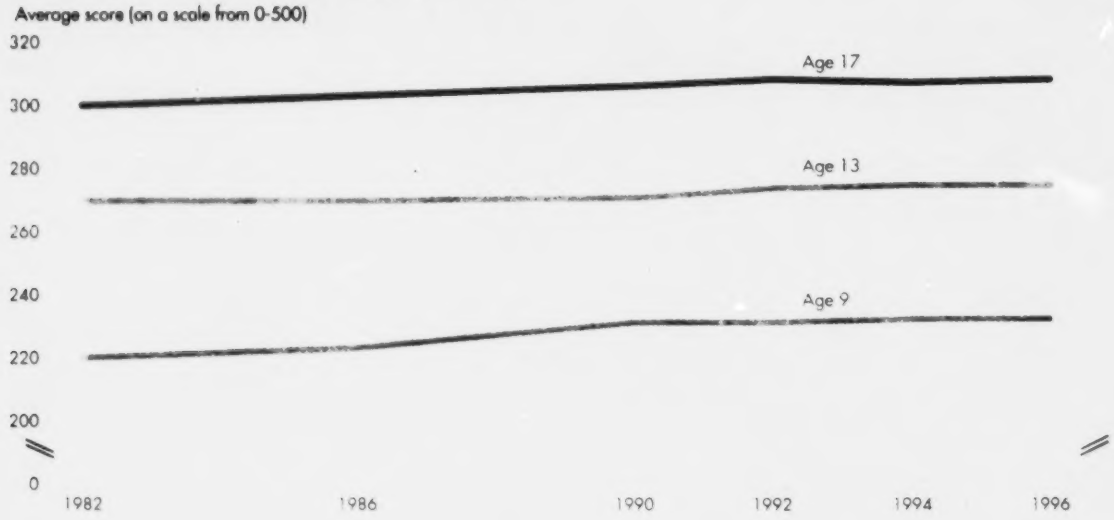
# Mathematics and Reading Achievement

The extent and content of students' knowledge, as well as their ability to think, learn, and communicate, affect their ability to succeed in the labor market well beyond their earning of a degree or attending school for a given number of years. On average, students with higher test scores will earn more and will be unemployed less often than students with lower test scores.[32] Mathematics and reading achievement test scores are important measures of students' skills in these subject areas, as well as good indicators of achievement overall in school. To assess progress in mathematics and reading, the National Assessment of Educational Progress measures national trends in the academic performance of students at ages 9, 13, and 17.

**Indicator ED3.A** **Average mathematics scale scores for students ages 9, 13, and 17, selected years 1982-96**




NOTE: The mathematics proficiency scale ranges from 0 to 500, with the following skill levels associated with the corresponding scale score:
Level 150: Simple arithmetic facts
Level 200: Beginning skills and understandings
Level 250: Numerical operations and beginning problem solving
Level 300: Moderately complex procedures and reasoning
Level 350: Multi-step problem solving and algebra
SOURCE: U.S. Department of Education, National Center for Education Statistics, National Assessment of Educational Progress.

- Average math scores increased for all age groups between 1982 and 1996, with the greatest increase for 9-year-olds.
- Average reading scores have not improved among students ages 13 and 17 since 1980, and have declined slightly among 9-year-olds.

## Indicator ED3.B

## Average reading scale scores for students ages 9, 13, and 17, selected years 1980-96

NOTE: The reading proficiency scale ranges from 0 to 500 with the following skill levels associated with the corresponding scale score:
Level 150: Simple, discrete reading tasks
Level 200: Partial skills and understanding
Level 250: Interrelates ideas and makes generalizations
Level 300: Understands complicated information
Level 350: Learns from specialized reading materials
SOURCE: U.S. Department of Education, National Center for Education Statistics, National Assessment of Educational Progress.

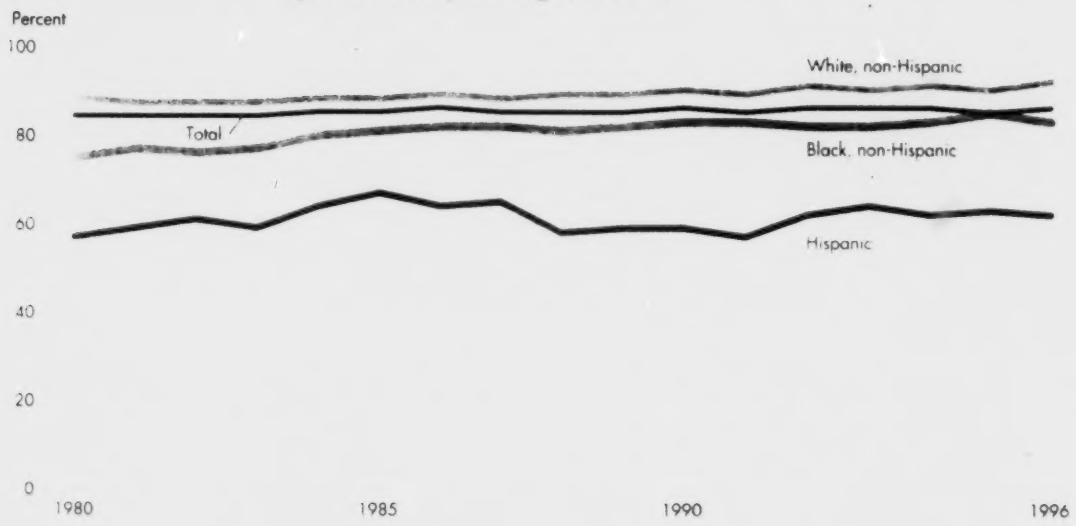
- White, non-Hispanic students consistently have had higher reading and math scores than either black, non-Hispanic or Hispanic students at ages 9, 13, and 17. However, the gaps between white non-Hispanics and black non-Hispanics and between white non-Hispanics and Hispanics decreased in each subject in some age groups during the 1980s.
- On average, students at ages 13 and 17 whose parents have completed more years of school have higher reading and math scores than do their peers whose parents have had fewer years of education.[53]
- Girls have consistently higher reading scores than boys at all ages. Boys outperformed girls in math at all ages in 1996. There has been a slight narrowing of the gender gap in math among 17-year-olds, and for most years the differences between boys and girls at ages 9 and 13 were not significant.

*Bullets contain references to data that can be found in Tables ED3.A and ED3.B on pages 95 and 96. Endnotes begin on page 57.*

# High School Completion

A high school diploma or its equivalent represents mastery of the basic reading, writing, and math skills a person needs to function in modern society. The percentage of young adults ages 18 to 24 with a high school diploma or an equivalent credential is a measure of the extent to which young adults have completed a basic prerequisite for many entry-level jobs as well as higher education.

**Indicator ED4** **Percentage of adults ages 18 to 24 who have completed high school by race and Hispanic origin, 1980-96**




NOTE: Percentages are based only on those not currently enrolled in high school or below. Prior to 1992, this indicator was measured as completing 4 or more years of high school.
SOURCE: U.S. Bureau of the Census, October Current Population Survey. Tabulated by U.S. Department of Education, National Center for Education Statistics.

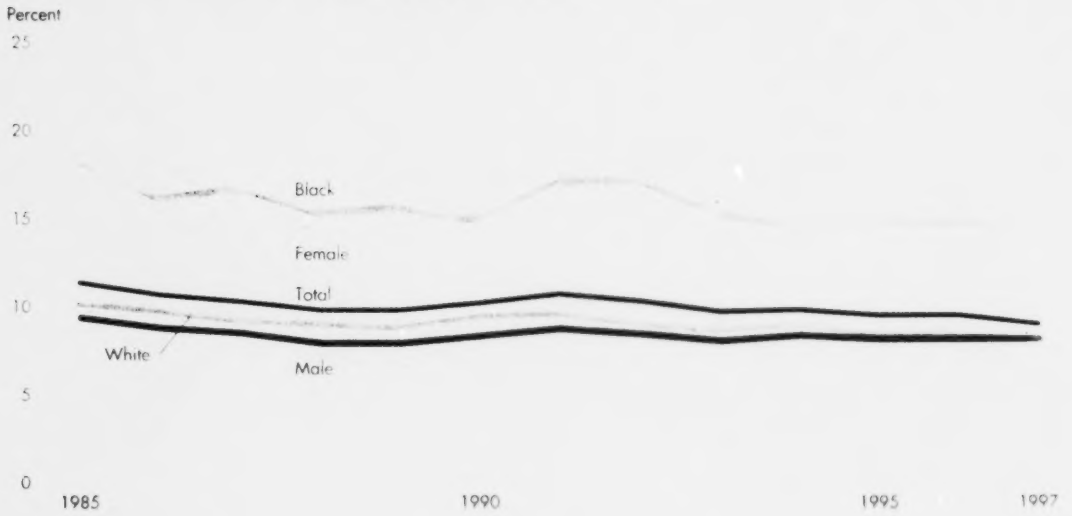
- In 1996, 86 percent of young adults ages 18 to 24 who were not currently enrolled in high school had completed high school, either with a diploma or an alternative credential such as a General Education Development (GED) test. The high school completion rate has increased slightly since 1980, when it was 84 percent.
- The rate at which black, non-Hispanics completed high school increased markedly between 1980 and 1990, from 75 percent to 83 percent, and has remained relatively stable since then. Among white, non-Hispanics, high school completion rates increased slightly, from 88 percent in 1980 to 92 percent in 1996.
- Hispanics consistently have lower high school completion rates than either black, non-Hispanics or white, non-Hispanics, fluctuating between a low of 57 percent in 1980 and a high of 67 percent in 1985 during the 1980-1996 period. The Hispanic high school completion rate was 62 percent in 1996.
- Most young adults (76 percent in 1996) complete high school by earning a regular high school diploma. Others complete high school by earning an alternative credential, such as the GED. The proportion of young adults ages 18 to 24 who had earned an alternative credential rose 5 percentage points in 3 years, from 5 percent in 1993 to 10 percent in 1996, while the proportion earning a regular diploma decreased about 5 percentage points over the same period.

*Bullets contain references to data that can be found in Table ED4 on page 97.*

# Youth Neither Enrolled in School Nor Working

The transition from adolescence to adulthood is a critical period in each individual's life. The percent of youth ages 16 to 19 who are neither in school nor working are detached from both of the core activities that usually occupy people during this critical period. Youth who are detached from both activities, particularly if this situation lasts for several years, are at increased risk of having lower earnings and a less stable employment history than their peers who stayed in school and/or secured jobs.[51] The percentage of youth who are not enrolled in school and not working measures the proportion of young people who are in circumstances that may seriously limit their future prospects.

**Indicator ED5** **Percentage of youth ages 16 to 19 who are neither enrolled in school nor working by gender and race, 1985-97**




SOURCE: U.S. Bureau of Labor Statistics, Current Population Survey.

- In 1997, about 9 percent of the Nation's 16- to 19-year-olds were neither enrolled in school nor working, slightly lower than the rate of 11 percent in 1985.
- Most of the decline in the proportion of detached youth occurred among young women. In 1985, 13 percent of young women were neither in school nor working. By 1997, this proportion had decreased to 10 percent. Nevertheless, young women continue to be more likely to be detached from these activities than young men.
- Black youth are considerably more likely to be detached from these activities than white youth. In 1997, 14 percent of black youth were neither in school nor working, compared to 8 percent of white youth. In addition, 14 percent of Hispanic youth were neither in school nor working.
- The proportion of black youth who are neither enrolled in school nor working has decreased from a high of 18 percent in 1985 to 14 percent in 1997.
- Older youth, ages 18 to 19, are over three times more likely to be detached from these activities than youth ages 16 to 17. In 1997, 14 percent of youth ages 18 to 19 were neither enrolled in school nor working compared to 4 percent of youth ages 16 to 17.

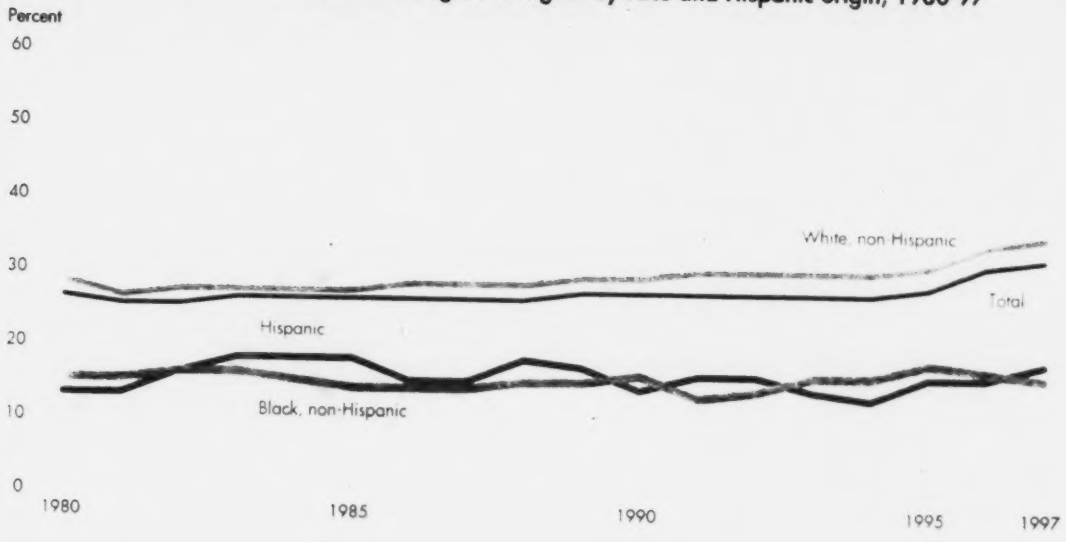
*Bullets contain references to data that can be found in Table ED5 on page 98. Endnotes begin on page 57.*

# Higher Education

Higher education, especially completion of a bachelor's or more advanced degree, generally enhances a person's employment prospects and increases his or her earning potential.[55] The percentage of high school graduates who have completed a bachelor's degree is one measure of the percentage of young people who have successfully applied for and persisted through a program of higher education.

**Indicator ED6**

**Percentage of high school graduates ages 25 to 29 who have completed a bachelor's degree or higher by race and Hispanic origin, 1980-97**




NOTE: Prior to 1992, this indicator was measured as having "4 or more years of college" rather than the actual attainment of a bachelor's degree.
SOURCE: U.S. Bureau of the Census, March Current Population Survey. Tabulated by U.S. Department of Education, National Center for Education Statistics.

- In 1997, 32 percent of high school graduates ages 25 to 29 had earned a bachelor's or a higher degree.
- This percentage increased slightly between 1980 and 1995, from 26 to 28 percent, then increased 4 percentage points between 1995 and 1997.
- White, non-Hispanic high school graduates ages 25 to 29 are more likely than either black, non-Hispanic or Hispanic high school graduates in the same age group to have earned a bachelor's degree. In 1997, 35 percent of white, non-Hispanic, 16 percent of black, non-Hispanic, and 18 percent of Hispanic high school graduates in this age group had earned a bachelor's degree or higher.
- In 1997, 9 percent of high school graduates ages 25 to 29 had earned an associate degree but not a bachelor's degree.
- In 1997, 9 percent of white, non-Hispanic high school graduates ages 25 to 29 had associate degrees as their highest degree, as did about 7 percent of black, non-Hispanic and 9 percent of Hispanic high school graduates in this age group.
- Racial and ethnic group differences in rates of enrollment in college are smaller than differences in rates of degree attainment. In 1996, 45 percent of white, non-Hispanic high school graduates ages 18 to 24 were enrolled in college, compared to 36 percent of non-Hispanic blacks and 34 percent of Hispanics.[56]

*Bullets contain references to data that can be found in Table ED6 on page 99. Endnotes begin on page 57.*

# Indicators Needed

## Education

Better data are needed to track children's well-being in education in the following areas:

- *Early childhood development.* Although the report offers two indicators of young children's exposure to reading and early childhood education, there is no regular source of information that can be used to monitor specific social, intellectual, and emotional skills of preschoolers over time.
- *Course-taking.* Several different indicators of course-taking are possible with current data sources, yet there is a lack of consensus over what courses are predictive of a child's better life chances in the future, and therefore are the most important courses to monitor over time. In addition, data on student course-taking behavior, particularly for middle school courses critical to a student's academic development, are not regularly available. More work needs to be done to develop a survey and transcript studies that address these questions for middle school students.

# Indicators of Children's Well-Being

## Special Features

This report so far has presented indicators for which data are regularly available over many years. However, for some important measures of children's well-being, data are not collected on a regular basis. This section presents two such indicators. The first has data for only two time periods. The second has data for only one.



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## Blood Lead Levels

Research shows that a level of 10 micrograms of lead per deciliter of blood (10 µg/dL) in young children can result in lowered intelligence or behavior problems.[57] Elevated blood lead levels in young children often result when children have contact with contaminated soil or orally ingest peeling lead paint in their homes. Lead in plumbing may be another contributor in some households. In the past, inhalation of fumes from leaded gasoline was a major contributor to elevated child blood lead levels.

**Indicator SPECIAL1** Percentage of children ages 1 to 5 with blood lead levels of 10 micrograms per deciliter or more by poverty status, 1976-80 and 1988-94

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health and Nutrition Examination Survey II (conducted 1976-80) and National Health and Nutrition Examination Survey III (conducted 1988-94).

- During 1988-94, 6 percent of children ages 1 to 5 in the United States had an elevated level of blood lead. This was a sharp decline from 1976-80, when 88 percent of children had an elevated level of blood lead.
- The decline of 82 percentage points from 1976-80 to 1988-94 in the proportion of children with an elevated level of blood lead resulted from legislation banning lead from paint and plumbing supplies, and from the phasing out of lead in gasoline between 1973 and 1995.
- Children living in families below poverty were about 3.5 times more likely than children in families above the poverty line to have an elevated level of blood lead in 1988-94. Children below poverty are more likely than other children to live in older, sub-standard housing with lead paint. They may also have greater exposure to lead contamination in soil.[58]
- In 1976-80, the vast majority of children living in families above and below the poverty line had elevated blood lead levels. While both groups experienced steep declines in elevated blood lead, the drop was sharper for children at or above poverty, resulting in a greater disparity between the two groups in 1988-94 than in 1976-80.

*Bullets contain references to data that can be found in Table SPECIAL1 on page 99. Endnotes begin on page 57.*

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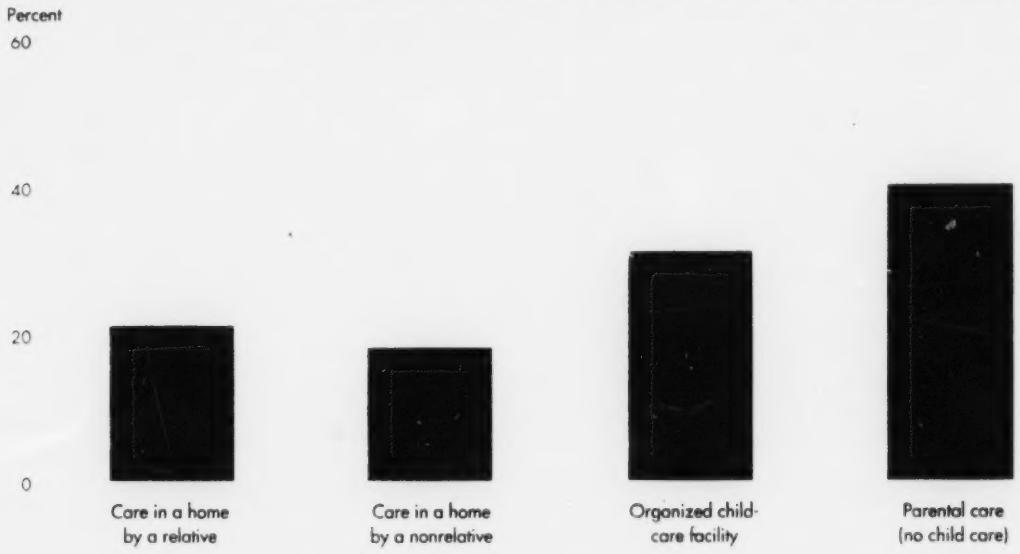
# Child Care

Increasing numbers of preschool age children are spending time in the care of a child-care provider other than with their parents. While researchers continue to assess the effects of child care on child development, it is important to monitor this change in children's care, and the Forum is developing an indicator that will allow us to monitor this over time. This indicator presents the most recent data on how many children receive care and early education on a regular basis from persons other than their parents, regardless of their parents' working status.[59]

**Indicator SPECIAL2** **Percentage of children under age 6 participating in child-care and early childhood education programs on a regular basis by type of arrangement, 1995**




NOTE: Children with multiple child-care arrangements are counted in each relevant category.
SOURCE: U.S. Department of Education, National Center for Education Statistics, National Household Education Survey, 1995.

- In 1995, 6 out of 10 children under the age of 6 who had not yet entered kindergarten were receiving some type of care and education on a regular basis from persons other than their parents. This translates to more than 12.9 million infants, toddlers, and preschool children who were receiving such care and education.
- Children were more likely to be placed in the care of an organized child-care facility or early childhood education program (31 percent) than to be placed in the care of a relative or a nonrelative in a home (21 percent and 18 percent, respectively).
- The Survey of Income and Program Participation, which studies child-care arrangements for children of working mothers, has found that the type of child-care arrangement that parents are most likely to choose has changed since 1988. Among children under age 5, the proportion of children placed in formal-group settings has increased, while the proportion cared for by nonrelatives in private homes has declined.[60]
- Children are more likely to participate in child care and early education if their mothers work. Eighty-eight percent of children whose mothers work full time and 75 percent of children of mothers who work part time regularly receive care from a nonparent.
- Children are less likely to participate in child care and early education if they are living below the poverty threshold. Forty-nine percent of children living below the poverty line participate in these programs, compared to 65 percent of children living above the poverty threshold.

*Bullets contain references to data that can be found in Table SPECIAL2 on page 100. Endnotes begin on page 57.*

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# Notes to Indicators

[1] Adult respondents were asked if the children in the household spoke a language other than English at home and how well they could speak English. Categories used for reporting were "Very well," "Well," "Not well," and "Not at all." All those who were reported to speak English less than "Very well" were considered to have difficulty speaking English based on an evaluation of the English-speaking ability of a sample of the children in the 1980s.

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[15] The most common problems meeting the definition are lacking complete plumbing for exclusive use, having unvented room heaters as the primary heating equipment, and multiple upkeep problems such as water leakage, open cracks or holes, broken plaster, or signs of rats.

[16] Paying 30 percent or more of income for housing may leave insufficient resources for other basic needs. National Academy of Sciences. (1995). *Measuring poverty: A new approach.* Washington, DC: National Academy Press.

[17] Income-eligible families who report either severe housing cost burdens or severe physical problems with their housing are considered by the U.S. Department of Housing and Urban Development to have "priority" housing problems.

[18] "Very-low-income renters" are renter households with incomes at or below half the median income in their geographic area.

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[59] The term "regular basis" was not defined for respondents; however, they were instructed not to include occasional baby-sitting. Analysis shows that 99 percent of children in center-based settings received care and education on a weekly basis, and for those in relative and nonrelative care in a home, the percentages were 96 percent and 99 percent, respectively.

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# Appendix A: Detailed Tables

Tables include data from 1980, 1985, and 1990-97 where available. Data from intervening years are available on the Forum's web site at: http://childstats.gov



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## Table POP1

Number of children under age 18 in the United States by age, selected years 1950-97 and projected 2000-2020

| | | | | | | | | | | Projected | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Age group** | **1950** | **1960** | **1970** | **1980** | **1985** | **1990** | **1995** | **1996** | **1997** | **2000** | **2010** | **2020** |
| All children | 47.3 | 64.5 | 69.8 | 63.7 | 62.6 | 64.2 | 68.4 | 69.0 | 69.5 | 70.8 | 72.5 | 77.6 |
| Age group | | | | | | | | | | | | |
| Ages 0-5 | 19.1 | 24.3 | 20.9 | 19.6 | 21.4 | 22.5 | 23.5 | 23.4 | 23.2 | 22.9 | 23.9 | 26.4 |
| Ages 6-11 | 15.3 | 21.8 | 24.6 | 20.8 | 19.6 | 21.6 | 22.6 | 23.0 | 23.4 | 24.3 | 23.6 | 25.8 |
| Ages 12-17 | 12.9 | 18.4 | 24.3 | 23.3 | 21.6 | 20.1 | 22.3 | 22.6 | 23.0 | 23.6 | 25.0 | 25.4 |

SOURCE: U.S. Bureau of the Census, *Current Population Reports*, Series P-25, No. 311, *Estimates of the Population of the United States by Single Years of Age, Color, and Sex: 1900 to 1959*; Series P-25, No. 519, *Estimates of the Population of the United States, by Age, Sex, and Race: April 1, 1960 to July 1, 1973*; Series P-25, No. 917, *Preliminary Estimates of the Population of the United States by Age, Sex, and Race: 1970 to 1981*; Series P-25, No. 1130, *Population Projections of the United States by Age, Sex, Race, and Hispanic Origin: 1995 to 2050*; and unpublished estimates tables for 1980-97 that are available on the Census Bureau web site.

## Table POP2

Persons in selected age groups as a percentage of the total U.S. population, and children under age 18 as a percentage of the dependent population, selected years 1950-97 and projected 2000-2020

| | | | | | | | | | | Projected | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Age group** | **1950** | **1960** | **1970** | **1980** | **1985** | **1990** | **1995** | **1996** | **1997** | **2000** | **2010** | **2020** |
| Percent of total | | | | | | | | | | | | |
| Ages 0-17 | 31 | 36 | 34 | 28 | 26 | 26 | 26 | 26 | 26 | 26 | 24 | 24 |
| Ages 18-64 | 61 | 55 | 56 | 61 | 62 | 62 | 61 | 61 | 61 | 62 | 62 | 59 |
| Ages 65+ | 8 | 9 | 10 | 11 | 12 | 13 | 13 | 13 | 13 | 13 | 13 | 16 |
| Total, all ages | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |
| Percent of dependent population[a] | | | | | | | | | | | | |
| Ages 0-17 | 79 | 79 | 78 | 71 | 69 | 67 | 67 | 67 | 67 | 67 | 65 | 59 |

[a] The dependent population includes all persons ages 17 and under, and 65 and over.

SOURCE: U.S. Bureau of the Census, *Current Population Reports*, Series P-25, No. 311, *Estimates of the Population of the United States by Single Years of Age, Color, and Sex: 1900 to 1959*; Series P-25, No. 519, *Estimates of the Population of the United States, by Age, Sex, and Race: April 1, 1960 to July 1, 1973*; Series P-25, No. 917, *Preliminary Estimates of the Population of the United States by Age, Sex, and Race: 1970 to 1981*; Series P-25, No. 1130, *Population Projections of the United States by Age, Sex, Race, and Hispanic Origin: 1995 to 2050*; and unpublished estimates tables for 1980-97 that are available on the Census Bureau web site.

## Table POP3

Racial and ethnic composition: Percentage distribution of U.S. children under age 18 by race and Hispanic origin groups, selected years 1980-97 and projected 2000-2020

| Race and Hispanic origin | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996 | 1997 | Projected 2000 | Projected 2010 | Projected 2020 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| White, non-Hispanic | 74 | 72 | 69 | 68 | 68 | 67 | 67 | 67 | 66 | 66 | 64 | 59 | 55 |
| Black, non-Hispanic | 15 | 15 | 15 | 15 | 15 | 15 | 15 | 15 | 15 | 15 | 15 | 16 | 16 |
| Hispanic[a] | 9 | 10 | 12 | 13 | 13 | 13 | 14 | 14 | 14 | 15 | 16 | 19 | 22 |
| Asian/Pacific Islander[b] | 2 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 6 | 6 |
| American Indian/Alaska Native[b] | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |

[a] Persons of Hispanic origin may be of any race.

[b] Excludes persons in this race group who are of Hispanic origin.

SOURCE: U.S. Bureau of the Census, *Current Population Reports*, Series P-25, No. 311, *Estimates of the Population of the United States by Single Years of Age, Color, and Sex: 1900 to 1959*; Series P-25, No. 519, *Estimates of the Population of the United States, by Age, Sex, and Race: April 1, 1960 to July 1, 1973*; Series P-25, No. 917, *Preliminary Estimates of the Population of the United States by Age, Sex, and Race: 1970 to 1981*; Series P-25, No. 1130, *Population Projections of the United States by Age, Sex, Race, and Hispanic Origin: 1995 to 2050*; and unpublished estimates tables for 1980-97 that are available on the Census Bureau web site.

**Table POP4** Difficulty speaking English: Children ages 5 to 17 who speak a language other than English at home, and who are reported to have difficulty speaking English[a] by race and Hispanic origin, region, selected years 1979-95

| Characteristic | 1979 | 1989 | 1992 | 1995[b] |
|---|---|---|---|---|
| **Children who speak another language at home** | | | | |
| Number (in thousands) | 3,825 | 5,293 | 6,375 | 6,656 |
| Percent of children ages 5-17 | 8.5 | 12.6 | 14.2 | 14.1 |
| Race and Hispanic origin | | | | |
| White, non-Hispanic | 3.2 | 3.5 | 3.7 | 3.6 |
| Black, non-Hispanic | 1.3 | 2.4 | 4.2 | 3.0 |
| Hispanic[c] | 75.1 | 71.2 | 76.6 | 73.9 |
| Other, non-Hispanic[d] | 44.1 | 53.4 | 58.3 | 45.5 |
| Region[e] | | | | |
| Northeast | 10.5 | 13.5 | 16.2 | 15.1 |
| Midwest | 3.7 | 4.9 | 5.6 | 5.9 |
| South | 6.8 | 10.7 | 11.1 | 11.7 |
| West | 17.0 | 24.2 | 27.2 | 26.4 |
| **Children who have difficulty speaking English** | | | | |
| Number (in thousands) | 1,250 | 1,850 | 2,178 | 2,431 |
| Percent of children ages 5-17 | 2.8 | 4.4 | 4.9 | 5.1 |
| Race and Hispanic origin | | | | |
| White, non-Hispanic | 0.5 | 0.8 | 0.6 | 0.7 |
| Black, non-Hispanic | 0.3 | 0.5 | 1.3 | 0.9 |
| Hispanic[c] | 28.7 | 27.4 | 29.9 | 31.0 |
| Other, non-Hispanic[d] | 19.8 | 20.4 | 21.0 | 14.1 |
| Region[e] | | | | |
| Northeast | 2.9 | 4.8 | 5.3 | 5.0 |
| Midwest | 1.1 | 1.3 | 1.6 | 2.3 |
| South | 2.2 | 3.8 | 3.5 | 3.4 |
| West | 6.5 | 8.8 | 10.4 | 11.4 |
| Percent of those speaking another language at home | 32.7 | 34.9 | 34.2 | 36.5 |
| Race and Hispanic origin | | | | |
| White, non-Hispanic | 17.3 | 22.6 | 17.2 | 19.0 |
| Black, non-Hispanic | 25.6 | 22.5 | 31.0 | 31.8 |
| Hispanic[c] | 38.2 | 38.5 | 39.0 | 41.9 |
| Other, non-Hispanic[d] | 44.9 | 38.1 | 36.1 | 31.1 |

[a] Respondents were asked if the children in the household spoke a language other than English at home and how well they could speak English. Categories used for reporting were "Very well," "Well," "Not well," and "Not at all." All those reported to speak English less than "Very well" were considered to have difficulty speaking English based on an evaluation of the English speaking ability of a sample of the children in the 1980s.

[b] Numbers in these years may reflect changes in CPS because of newly instituted computer-assisted interviewing techniques and/or because of the change in the population controls to the 1990 Census-based estimates, with adjustments.

[c] Persons of Hispanic origin may be of any race.

[d] Most in this category are Asian/Pacific Islanders, but American Indian/Alaska Native children also are included.

[e] Regions: Northeast includes Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, and Vermont. Midwest includes Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, and Wisconsin. South includes Alabama, Arkansas, Delaware, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, and West Virginia. West includes Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, and Wyoming.

NOTE: The data for racial and ethnic groups may differ slightly from those published in 1998 due to a change in programming. All nonresponses to the language questions are excluded from the tabulations.

SOURCE: U.S. Bureau of the Census, October (1992 and 1995) and November (1979 and 1989) Current Population Surveys. Tabulated by the National Center for Education Statistics.

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**Table POP5** Family structure: Percentage distribution of children under age 18 by presence of parents in household, race and Hispanic origin, selected years 1980-97

| Race and family type | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994[b] | 1995[b] | 1996[b] | 1997[b] |
|---|---|---|---|---|---|---|---|---|---|---|
| Total | | | | | | | | | | |
| Two parents | 77 | 74 | 73 | 72 | 71 | 71 | 69 | 69 | 68 | 68 |
| Mother only | 18 | 21 | 22 | 22 | 23 | 23 | 23 | 23 | 24 | 24 |
| Father only | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 |
| No parent | 4 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 |
| White | | | | | | | | | | |
| Two parents | 83 | 80 | 79 | 78 | 77 | 77 | 76 | 76 | 75 | 75 |
| Mother only | 14 | 16 | 16 | 17 | 18 | 17 | 18 | 18 | 18 | 18 |
| Father only | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 |
| No parent | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 |
| Black | | | | | | | | | | |
| Two parents | 42 | 40 | 38 | 36 | 36 | 36 | 33 | 33 | 33 | 35 |
| Mother only | 44 | 51 | 51 | 54 | 54 | 54 | 53 | 52 | 53 | 52 |
| Father only | 2 | 3 | 4 | 4 | 3 | 3 | 4 | 4 | 4 | 5 |
| No parent | 12 | 6 | 8 | 6 | 7 | 7 | 10 | 11 | 9 | 8 |
| Hispanic[a] | | | | | | | | | | |
| Two parents | 75 | 68 | 67 | 66 | 65 | 65 | 63 | 63 | 62 | 64 |
| Mother only | 20 | 27 | 27 | 27 | 28 | 28 | 28 | 28 | 29 | 27 |
| Father only | 2 | 2 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 |
| No parent | 3 | 3 | 3 | 4 | 3 | 4 | 5 | 4 | 5 | 5 |

[a] Persons of Hispanic origin may be of any race.

[b] Numbers in these years may reflect changes in CPS because of newly instituted computer-assisted interviewing techniques and/or because of the change in the population controls to the 1990 Census-based estimates, with adjustments.

NOTE: Family structure refers to the presence of biological, adoptive, and stepparents in the child's household. Thus, a child with a biological mother and stepfather living in the household is said to have two parents. On the other hand, a child living in a household headed by his never married father and the father's unmarried partner would be classified as being in a father-only family structure, even if the father's unmarried partner is the child's biological mother.

SOURCE: U.S. Bureau of the Census, Current Population Reports, Marital Status and Living Arrangements, annual reports. (Beginning in 1995, detailed tables are available on the Census Bureau web site.)

**Table POP6** Birth rates for unmarried women by age of mother, selected years 1980-96

(Births per 1,000 unmarried women in specific age group)

| Age of mother | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996* |
|---|---|---|---|---|---|---|---|---|---|
| Total ages 15-44 | 29.4 | 32.8 | 43.8 | 45.2 | 45.2 | 45.3 | 46.9 | 45.1 | 44.6 |
| Age group | | | | | | | | | |
| Ages 15-17 | 20.6 | 22.4 | 29.6 | 30.9 | 30.4 | 30.6 | 32.0 | 30.5 | — |
| Ages 18-19 | 39.0 | 45.9 | 60.7 | 65.7 | 67.3 | 66.9 | 70.1 | 67.6 | — |
| Ages 20-24 | 40.9 | 46.5 | 65.1 | 68.0 | 68.5 | 69.2 | 72.2 | 70.3 | — |
| Ages 25-29 | 34.0 | 39.9 | 56.0 | 56.5 | 56.5 | 57.1 | 59.0 | 56.1 | — |
| Ages 30-34 | 21.1 | 25.2 | 37.6 | 38.1 | 37.9 | 38.5 | 40.1 | 39.6 | — |
| Ages 35-39 | 9.7 | 11.6 | 17.3 | 18.0 | 18.8 | 19.0 | 19.8 | 19.5 | — |
| Ages 40-44 | 2.6 | 2.5 | 3.6 | 3.8 | 4.1 | 4.4 | 4.7 | 4.7 | — |

— = not available

* Preliminary data.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System. Ventura, S.J., Martin, J.A., Curtin, S.C., and Mathews, T.J. (1997). Report of Final Natality Statistics, 1995. *Monthly Vital Statistics Report*, Vol. 45, No. 11, Supp. 1. Hyattsville, MD: National Center for Health Statistics. Ventura, S.J., Peters, K.D., Martin, J.A., Maurer, J.D. (1997). Births and Deaths: United States, 1996. *Monthly Vital Statistics Report*, Vol. 46, No. 1, Supp. 2. Hyattsville, MD: National Center for Health Statistics.

**Table ECON1.A** Child poverty: Percentage of children under age 18 living below selected poverty levels by age, family structure, race, and Hispanic origin, selected years 1980-96

| Characteristic | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996 |
|---|---|---|---|---|---|---|---|---|---|
| **Under 100 percent of poverty** | | | | | | | | | |
| Related and not related children | 18 | 21 | 21 | 22 | 22 | 23 | 22 | 21 | 21 |
| Children in all families | | | | | | | | | |
| Related children | 18 | 20 | 20 | 21 | 22 | 22 | 21 | 20 | 20 |
| White, non-Hispanic | — | — | 12 | 12 | 12 | 13 | 12 | 11 | 10 |
| Black | 42 | 43 | 44 | 46 | 46 | 46 | 43 | 42 | 40 |
| Hispanic[a] | 33 | 40 | 38 | 40 | 39 | 40 | 41 | 39 | 40 |
| Related children under age 6 | 20 | 23 | 23 | 24 | 26 | 26 | 25 | 24 | 23 |
| Related children ages 6-17 | 17 | 19 | 18 | 20 | 19 | 20 | 20 | 18 | 18 |
| Children in married-couple families | | | | | | | | | |
| Related children | — | — | 10 | 11 | 11 | 12 | 11 | 10 | 10 |
| White, non-Hispanic | — | — | 7 | 7 | 7 | 8 | 7 | 6 | 5 |
| Black | — | — | 18 | 15 | 18 | 18 | 15 | 13 | 14 |
| Hispanic[a] | — | — | 27 | 29 | 29 | 30 | 30 | 28 | 29 |
| Related children under age 6 | — | — | 12 | 12 | 13 | 13 | 12 | 11 | 12 |
| Related children ages 6-17 | — | — | 10 | 10 | 10 | 11 | 10 | 9 | 9 |
| Children in female-householder families, no husband present | | | | | | | | | |
| Related children | 51 | 54 | 53 | 56 | 55 | 54 | 53 | 50 | 49 |
| White, non-Hispanic | — | — | 40 | 41 | 40 | 39 | 38 | 34 | 35 |
| Black | 65 | 67 | 65 | 68 | 67 | 66 | 63 | 62 | 58 |
| Hispanic[a] | 65 | 72 | 68 | 69 | 66 | 66 | 68 | 66 | 67 |
| Related children under age 6 | 65 | 66 | 66 | 66 | 66 | 64 | 64 | 62 | 59 |
| Related children ages 6-17 | 46 | 48 | 47 | 50 | 49 | 49 | 47 | 45 | 45 |
| **Under 50 percent of poverty** | | | | | | | | | |
| Children in all families | | | | | | | | | |
| Related children | 7 | 8 | 8 | 9 | 10 | 10 | 9 | 8 | 8 |
| White, non-Hispanic | — | — | 4 | 5 | 5 | 5 | 4 | 3 | 4 |
| Black | 17 | 22 | 22 | 25 | 27 | 26 | 23 | 20 | 20 |
| Hispanic[a] | — | — | 14 | 14 | 15 | 14 | 17 | 16 | 14 |
| **Under 150 percent of poverty** | | | | | | | | | |
| Children in all families | | | | | | | | | |
| Related children | 29 | 32 | 31 | 32 | 33 | 33 | 32 | 32 | 31 |
| White, non-Hispanic | — | — | 21 | 21 | 21 | 22 | 21 | 19 | 19 |
| Black | 57 | 59 | 57 | 60 | 60 | 61 | 58 | 56 | 56 |
| Hispanic[a] | — | — | 55 | 58 | 58 | 60 | 58 | 59 | 57 |

— = not available

[a] Persons of Hispanic origin may be of any race.

NOTE: Estimates refer to children who are related to the householder and who are under age 18. The poverty level is based on money income and does not include noncash benefits, such as food stamps. Poverty thresholds reflect family size and composition and are adjusted each year using the annual average Consumer Price Index (CPI) level. The poverty threshold for a family of four was $16,036 in 1996. The levels shown here are derived from the ratio of the family's income to the family's poverty threshold. Related children include biological children, stepchildren, and adopted children of the householder and all other children in the household related to the householder (or reference person) by blood, marriage, or adoption. For more detail, see U.S. Bureau of the Census, Series P-60, No. 188.

SOURCE: U.S. Bureau of the Census, March Current Population Survey, Current Population Reports, Consumer Income, Series P-60, various years.

**Table ECON1.B** Income distribution: Percentage of children under age 18 by family income relative to the poverty line, selected years 1930-96

| Poverty level | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996 |
|---|---|---|---|---|---|---|---|---|---|
| Extreme poverty | 6.6 | 8.1 | 8.3 | 9.3 | 9.9 | 9.6 | 9.4 | 7.9 | 8.4 |
| Below poverty but above extreme | 11.3 | 12.0 | 11.6 | 11.8 | 11.7 | 12.4 | 11.9 | 12.2 | 11.4 |
| Low income | 24.0 | 22.8 | 21.8 | 22.2 | 22.0 | 22.2 | 22.0 | 22.5 | 22.7 |
| Medium income | 41.4 | 37.7 | 37.0 | 35.7 | 34.9 | 33.4 | 33.7 | 34.5 | 34.0 |
| High income | 16.8 | 19.4 | 21.3 | 21.0 | 21.5 | 22.3 | 23.1 | 22.8 | 23.5 |
| Very high income | 4.3 | 6.0 | 7.3 | 6.9 | 7.2 | 8.3 | 8.9 | 8.8 | 9.0 |

NOTE: Estimates refer to children who are related to the householder and who are under age 18. The income classes are derived from the ratio of the family's income to the family's poverty threshold. Extreme poverty is less than 50 percent of the poverty threshold (i.e., $8,018 for a family of four in 1996). Poverty is between 50 and 100 percent of the poverty threshold (i.e., between $8,018 and $16,036 for a family of four in 1996). Low income is between 100 and 200 percent of the poverty threshold (i.e., between $16,037 and $32,072 for a family of four in 1996). Medium income is between 200 and 400 percent of the poverty threshold (i.e., between $32,073 and $64,144 for a family of four in 1996). High income is over 400 percent of the poverty threshold. Very high income is over 600 percent of the poverty threshold. (These income categories are similar to those used in the *Economic Report of the President*, (1998). Hernandez, D. (1993). *America's Children* uses a similar approach except that Hernandez uses the relationship to median income to define his categories. For either method, the income categories for the medium and high income are at similar levels of median family income.)

SOURCE: U.S. Bureau of the Census, March Current Population Survey.

## The Measurement of Poverty

The measurement of poverty used in this report is the official poverty measure used by the Bureau of the Census. A child is living below poverty if the child lives in a family with before-tax cash incomes below a defined level of need, called the poverty line. The official poverty line in use today was devised in the early 1960s based on the minimum cost of what was considered to be a nutritionally adequate diet. As originally defined, the poverty index signified the inability of families to afford the basic necessities of living, based on the budget and spending patterns of those Americans with an average standard of living. Since then the poverty line has been updated annually for inflation using the consumer price index for all urban consumers. The poverty line depends on the size of the family and the number of children in the family.

A 1995 report by the National Research Council[1] recommended changing the definition of both the poverty thresholds and the resources that are used to measure poverty. Its recommendations included the following:

**Defining income:** On the one hand, the definition of family income should be expanded to include other important resources of purchasing power, such as the earned income tax credit, food stamps, and housing subsidies. On the other hand, some necessary expenditures that reduce a family's resources available for basic consumption needs should be subtracted from income, such as taxes, necessary child care and other work-related expenditures, child support payments, and out-of-pocket medical expenditures.

**Setting a threshold:** Poverty thresholds should be adjusted to provide a more accurate measure of family income requirements. First, the consumption bundle used to derive thresholds should be based on food, clothing, and shelter, not food consumption alone. Second, thresholds should reflect regional variations in housing costs. Third, thresholds should be adjusted for family size in a more consistent way than is currently done. Finally, thresholds should be updated to reflect changes in expenditure patterns over time.

A recent study by staff at the Bureau of the Census and the Bureau of Labor Statistics[2] used key elements of the National Research Council proposal to estimate alternative poverty rates from 1991 to 1996. These estimates produced increases in child poverty from 1991 to 1993 similar to, and decreases in poverty from 1993 to 1996 somewhat larger than, those under the official measure. These changes reflect the fact that the new measure more completely accounts for in-kind transfers, such as food stamps and housing benefits, and for work-related expenditures. As a result, the new measure tends to decrease the relative poverty rate of children who are more likely to live in families that receive in-kind transfers, and to increase the relative poverty rate of children living with employed low-income persons with higher work-related expenses.

[1] Citro, C.F., and Micael, Robert T. (Eds.) (1995). *Measuring poverty: A new approach*. Washington, DC: National Academy Press.

[2] Short, K., Shea, M., Johnson, D., and Garner, T.I. (February 1998). Poverty Measurement Research Using the Consumer Expenditure Survey and the Survey of Income and Program Participation. Census manuscript.



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**Table ECON2** Secure parental employment: Percentage of children under age 18 living with parents with at least one parent employed full time,[a] all year by family structure, race, Hispanic origin, poverty status, and age, selected years 1980-96

| Characteristic | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996 |
|---|---|---|---|---|---|---|---|---|---|
| **All children living with parents[b]** | | | | | | | | | |
| Total | 70 | 70 | 72 | 71 | 71 | 71 | 72 | 74 | 75 |
| Race and Hispanic origin | | | | | | | | | |
| White | 74 | 74 | 76 | 75 | 76 | 76 | 77 | 78 | 79 |
| Black | 50 | 48 | 50 | 49 | 49 | 49 | 52 | 53 | 56 |
| Hispanic[c] | 59 | 55 | 60 | 57 | 57 | 57 | 59 | 61 | 64 |
| Poverty status | | | | | | | | | |
| Below poverty | 21 | 20 | 22 | 20 | 19 | 21 | 24 | 25 | 25 |
| At or above poverty | 81 | 82 | 85 | 85 | 85 | 85 | 86 | 86 | 87 |
| Age | | | | | | | | | |
| Children under 6 living with parents | 67 | 67 | 68 | 67 | 66 | 67 | 68 | 69 | 71 |
| Children ages 6-17 living with parents | 72 | 72 | 74 | 73 | 74 | 74 | 75 | 76 | 77 |
| **Children living in married-couple families** | | | | | | | | | |
| Total | 80 | 81 | 85 | 84 | 84 | 85 | 86 | 87 | 88 |
| Race and Hispanic origin | | | | | | | | | |
| White | 80 | 82 | 85 | 84 | 85 | 86 | 86 | 87 | 88 |
| Black | 73 | 76 | 84 | 82 | 81 | 80 | 86 | 85 | 86 |
| Hispanic[c] | 71 | 70 | 74 | 71 | 71 | 72 | 76 | 77 | 79 |
| Poverty status | | | | | | | | | |
| Below poverty | 38 | 37 | 44 | 38 | 37 | 41 | 46 | 46 | 48 |
| At or above poverty | 84 | 87 | 89 | 89 | 90 | 91 | 91 | 91 | 92 |
| Age | | | | | | | | | |
| Children under 6 living with parents | 76 | 79 | 83 | 82 | 83 | 83 | 85 | 86 | 87 |
| Children ages 6-17 living with parents | 81 | 82 | 85 | 85 | 85 | 86 | 86 | 87 | 88 |
| With both parents working full time all year | 17 | 20 | 25 | 25 | 27 | 27 | 28 | 28 | 30 |
| **Children living in families maintained by single mothers** | | | | | | | | | |
| Total | 33 | 32 | 33 | 33 | 33 | 33 | 35 | 38 | 39 |
| Race and Hispanic origin | | | | | | | | | |
| White | 36 | 36 | 37 | 37 | 38 | 36 | 38 | 41 | 42 |
| Black | 28 | 25 | 27 | 27 | 27 | 28 | 31 | 33 | 35 |
| Hispanic[c] | 22 | 22 | 24 | 25 | 24 | 24 | 23 | 27 | 27 |
| Poverty status | | | | | | | | | |
| Below poverty | 7 | 7 | 9 | 9 | 9 | 9 | 10 | 14 | 10 |
| At or above poverty | 59 | 59 | 60 | 61 | 61 | 59 | 61 | 61 | 64 |
| Age | | | | | | | | | |
| Children under 6 living with parents | 20 | 20 | 21 | 22 | 20 | 21 | 23 | 24 | 27 |
| Children ages 6-17 living with parents | 38 | 37 | 40 | 40 | 41 | 39 | 42 | 45 | 45 |

## Table ECON2 (cont.)

| Characteristic | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996 |
|---|---|---|---|---|---|---|---|---|---|
| **Children living in families maintained by single fathers** | | | | | | | | | |
| Total | 57 | 60 | 64 | 64 | 60 | 61 | 61 | 67 | 67 |
| Race and Hispanic origin | | | | | | | | | |
| White | 61 | 60 | 67 | 65 | 60 | 60 | 63 | 69 | 69 |
| Black | 41 | 59 | 53 | 56 | 61 | 66 | 55 | 63 | 61 |
| Hispanic[c] | 53 | 53 | 59 | 57 | 51 | 58 | 55 | 58 | 66 |
| Poverty status | | | | | | | | | |
| Below poverty | 15 | 23 | 21 | 18 | 17 | 19 | 26 | 24 | 30 |
| At or above poverty | 68 | 69 | 74 | 76 | 74 | 75 | 73 | 79 | 77 |
| Age | | | | | | | | | |
| Children under 6 living with parents | 48 | 57 | 58 | 57 | 55 | 55 | 55 | 54 | 61 |
| Children ages 6-17 living with parents | 59 | 62 | 67 | 68 | 63 | 65 | 63 | 74 | 70 |

[a] Full-time, full-year employment is defined as usually working full time (35 hours or more per week) for 50 to 52 weeks.

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| [b] Total children living with parents (in thousands) | 60,683 | 61,264 | 63,351 | 64,301 | 65,138 | 66,829 | 67,361 | 68,980 | 68,275 |
| Total living with relatives but not with parent(s) (in thousands) | 1,954 | 1,379 | 1,455 | 1,371 | 1,495 | 2,184 | 2,369 | 2,160 | 2,016 |

[c] Persons of Hispanic origin may be of any race.

SOURCE: U.S. Bureau of Labor Statistics, March Current Population Survey.

**Table ECON3** Housing problems among U.S. households with children under age 18, selected years 1978-95

| Household type | 1978 | 1983 | 1989 | 1993 | 1995 |
|---|---|---|---|---|---|
| **All households with children** | | | | | |
| Number of households (in thousands) | 32,267 | 33,584 | 35,735 | 35,462 | 37,264 |
| Percent with | | | | | |
| Any problems | 30 | 33 | 33 | 34 | 36 |
| Inadequate housing[a] | 9 | 8 | 9 | 7 | 7 |
| Crowded housing | 9 | 8 | 7 | 6 | 7 |
| Cost burden greater than 30 percent | 15 | 21 | 24 | 27 | 28 |
| Cost burden greater than 50 percent | 6 | 11 | 9 | 11 | 12 |
| Severe problems | 8 | 12 | 10 | 11 | 12 |
| **Very-low-income renter households with children[b]** | | | | | |
| Number of households (in thousands) | 4,176 | 5,091 | 5,892 | 6,653 | 6,508 |
| Percent with | | | | | |
| Any problems | 79 | 83 | 76 | 75 | 77 |
| Inadequate housing[a] | 18 | 18 | 18 | 14 | 13 |
| Crowded housing | 22 | 18 | 17 | 14 | 17 |
| Cost burden greater than 30 percent | 59 | 68 | 67 | 67 | 68 |
| Cost burden greater than 50 percent | 31 | 38 | 36 | 38 | 38 |
| Severe problems | 33 | 42 | 33 | 34 | 32 |
| Rental assistance | 23 | 23 | 29 | 28 | 29 |

[a] Inadequate housing refers to housing with "moderate or severe physical problems." The most common problems meeting the definition are lacking complete plumbing for exclusive use, having unvented room heaters as the primary heating equipment, and multiple upkeep problems such as water leakage, open cracks or holes, broken plaster, or signs of rats.

[b] Very-low-income households are those with incomes at or below one-half the median income in a geographic area.

NOTE: Moderate or severe physical problems. See definition in Appendix A of the American Housing Survey summary volume: American Housing Survey for the United States in 1995. Current Housing Reports, H150/95, U.S. Bureau of the Census, 1997. Cost burden: expenditures on housing and utilities are greater than 30 percent of reported income. Severe problems: cost burden is greater than 50 percent of income or severe physical problems among those not reporting housing assistance. See Office of Policy Development and Research, HUD. (1998). *Rental housing assistance—the crisis continues: The 1997 report to Congress on worst case housing n...* Washington, DC: Office of Policy Development and Research, Department of Housing and Urban Development.

1978 data based on 1970 Census weights, 1983 and 1989 data on 1980 weights, 1993 and 1995 data on 1990 weights.

SOURCE: U.S. Bureau of the Census and the Department of Housing and Urban Development, Annual Housing Survey and American Housing Survey. Tabulated by U.S. Department of Housing and Urban Development.

## Table ECON4.A

Food security: Percentage of children under age 18 in households reporting that there is sometimes or often "not enough to eat" by poverty status, selected years 1989-96

| Poverty status | 1989 | 1990 | 1991 | 1994 | 1995 | 1996 |
|---|---|---|---|---|---|---|
| All children | 4.7 | 3.8 | 3.5 | 2.4 | 2.9 | 3.4 |
| Poverty status | | | | | | |
| Below poverty | 14.3 | 17.2 | 13.6 | 8.7 | 9.9 | 15.2 |
| At or above poverty | 2.4 | 0.7 | 1.0 | 0.9 | 1.2 | 0.7 |

NOTE: The responses were provided by adults for each household. Sampling weights were used in computing the estimated percentages to reflect the experience of children.

SOURCE: United States Department of Agriculture, Agricultural Research Service, Continuing Survey of Food Intakes by Individuals (CSFII), 1989-91, 1994-96.

## Table ECON4.B

Food security: Percentage of children under age 18 in households experiencing food insecurity by level of food insecurity and poverty status, 1995

| | All children | Below poverty | At or above poverty |
|---|---|---|---|
| Food insecurity without hunger | 13.4 | 29.0 | 8.5 |
| Food insecurity with moderate or severe hunger | 6.1 | 15.6 | 3.0 |
| Food insecurity with moderate hunger | 5.1 | 12.8 | 2.6 |
| Food insecurity with severe hunger | 1.0 | 2.8 | 0.4 |

NOTE: *The Food Security Scale.* ECON4.B, the percentage of children under age 18 in households experiencing food insecurity with moderate to severe hunger, is based on the food security scale derived from data collected in the Food Security Supplement to the April 1995 Current Population Survey. This new measure improves upon food security indicator ECON4.A, percentage of children under age 18 in households reporting that there is sometimes or often "not enough to eat". Whereas ECON4.A is based on a single question concerning household food sufficiency, ECON4.B measures each household's pattern of responses to a battery of food security questions. Therefore, the two indicators are not directly comparable.

The food security scale provides a near-continuous measure of the level of food insecurity and hunger experienced within each household. A categorical measure based on the scale classifies households according to four designated levels of household food security: food secure, food insecure without hunger, food insecure with moderate hunger, and food insecure with severe hunger. Food-secure households do not report a significant number of instances of difficulty obtaining enough quality food. Food-insecure households without hunger report having difficulty obtaining enough food, reduced quality of diets, anxiety about their food supply, and increasing resort to emergency food sources and other coping behaviors, but do not report hunger to a significant degree. Food-insecure households with moderate hunger report food insecurity and significant instances of hunger for one or more adults and, in some cases, for children. Food-insecure households with severe hunger report food insecurity and significant instances of hunger for adults and children. For a detailed explanation of the new USDA/DHHS Food Security Measurement scale, see Food and Nutrition Service. (1997). *Household food security in the United States in 1995.* Washington, DC: Food and Nutrition Service.

SOURCE: Food Security Supplement to the April 1995 Current Population Survey.

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**Table ECON5.A** Access to health care: Percentage of children under age 18 covered by health insurance[a] by type of insurance, age, race, and Hispanic origin, 1987-96

| Characteristic | 1987 | 1988 | 1989 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996 |
|---|---|---|---|---|---|---|---|---|---|---|
| **All health insurance** | | | | | | | | | | |
| Total | 87 | 87 | 87 | 87 | 87 | 87 | 86 | 86 | 86 | 85 |
| Age | | | | | | | | | | |
| Ages 0-5 | 88 | 87 | 87 | 89 | 89 | 89 | 88 | 86 | 87 | 86 |
| Ages 6-11 | 87 | 87 | 87 | 87 | 88 | 88 | 87 | 87 | 87 | 85 |
| Ages 12-17 | 86 | 86 | 86 | 85 | 85 | 85 | 83 | 85 | 86 | 84 |
| Race and Hispanic origin | | | | | | | | | | |
| White | 88 | 88 | 88 | 87 | 88 | 88 | 87 | 87 | 87 | 86 |
| Black | 83 | 84 | 84 | 85 | 85 | 86 | 84 | 83 | 85 | 81 |
| Hispanic[b] | 72 | 71 | 70 | 72 | 73 | 75 | 74 | 72 | 73 | 71 |
| **Private health insurance** | | | | | | | | | | |
| Total | 74 | 74 | 74 | 71 | 70 | 69 | 67 | 66 | 66 | 66 |
| Age | | | | | | | | | | |
| Ages 0-5 | 72 | 71 | 71 | 68 | 66 | 65 | 63 | 60 | 60 | 62 |
| Ages 6-11 | 74 | 74 | 75 | 73 | 71 | 71 | 70 | 67 | 67 | 67 |
| Ages 12-17 | 75 | 76 | 76 | 73 | 72 | 71 | 69 | 70 | 71 | 70 |
| Race and Hispanic origin | | | | | | | | | | |
| White | 79 | 79 | 78 | 76 | 75 | 74 | 72 | 71 | 71 | 71 |
| Black | 49 | 50 | 52 | 49 | 45 | 46 | 46 | 43 | 44 | 45 |
| Hispanic[b] | 48 | 48 | 48 | 45 | 43 | 42 | 42 | 38 | 38 | 40 |
| **Public health insurance[c]** | | | | | | | | | | |
| Total | 19 | 19 | 19 | 22 | 24 | 25 | 27 | 26 | 26 | 25 |
| Age | | | | | | | | | | |
| Ages 0-5 | 22 | 23 | 24 | 28 | 30 | 33 | 35 | 33 | 33 | 31 |
| Ages 6-11 | 19 | 18 | 18 | 20 | 22 | 23 | 25 | 25 | 26 | 25 |
| Ages 12-17 | 16 | 16 | 15 | 18 | 19 | 19 | 20 | 20 | 21 | 19 |
| Race and Hispanic origin | | | | | | | | | | |
| White | 14 | 14 | 15 | 17 | 19 | 20 | 22 | 21 | 21 | 21 |
| Black | 42 | 42 | 41 | 45 | 48 | 49 | 50 | 48 | 49 | 45 |
| Hispanic[b] | 28 | 27 | 27 | 32 | 37 | 38 | 41 | 38 | 39 | 35 |

[a] Children are considered to be covered by health insurance if they had public or private coverage at any time during the year. Some children are covered by both types of insurance; hence, the sum of public and private is greater than the total.

[b] Persons of Hispanic origin may be of any race.

[c] Public health insurance for children consists mostly of Medicaid, but also includes Medicare and CHAMPUS/Tricare.

SOURCE: U.S. Bureau of the Census, Housing and Household Economic Statistics Division, unpublished tables based on analyses from the March Current Population Surveys.

**Table ECON5.B** Percentage of children under age 18 with no usual source of health care[a] by age and type of health insurance,[b] 1993-95

| Age and type of insurance | 1993 | 1994 | 1995 |
|---|---|---|---|
| **Children ages 0-17** | | | |
| Total | 7.6 | 7.2 | 7.9 |
| Type of insurance | | | |
| Private insurance[b] | 3.6 | 3.4 | 3.8 |
| Public insurance[b,c] | 10.1 | 7.0 | 10.7 |
| No insurance | 24.1 | 22.7 | 24.2 |
| **Children ages 0-4** | | | |
| Total | 5.0 | 4.7 | 6.6 |
| Type of insurance | | | |
| Private insurance[b] | 1.7 | 1.7 | 2.5 |
| Public insurance[b,c] | 7.0 | 5.0 | 10.4 |
| No insurance | 18.1 | 16.5 | 18.8 |
| **Children ages 5-17** | | | |
| Total | 8.7 | 8.2 | 8.5 |
| Type of insurance | | | |
| Private insurance[b] | 4.3 | 4.0 | 4.3 |
| Public insurance[b,c] | 12.3 | 8.3 | 10.9 |
| No insurance | 26.2 | 24.9 | 26.0 |

[a] Excludes emergency rooms as a usual source of care.

[b] Children with both public and private insurance coverage are placed in the private insurance category.

[c] Public health insurance for children consists mostly of Medicaid, but also includes Medicare and CHAMPUS/Tricare.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Surveys.

**Table HEALTH1** General health status: Percentage of children under age 18 in very good or excellent health by age and poverty status, selected years 1984-95

| Age and poverty status | 1984 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 |
|---|---|---|---|---|---|---|---|
| Children ages 0-17 | | | | | | | |
| Total | 78 | 81 | 80 | 80 | 79 | 79 | 81 |
| Poverty status | | | | | | | |
| Below poverty | 62 | 66 | 65 | 65 | 64 | 64 | 65 |
| At or above poverty | 82 | 84 | 83 | 83 | 83 | 83 | 85 |
| Children ages 0-4 | | | | | | | |
| Total | 79 | 81 | 81 | 80 | 80 | 81 | 81 |
| Poverty status | | | | | | | |
| Below poverty | 66 | 69 | 68 | 67 | 68 | 68 | 66 |
| At or above poverty | 82 | 84 | 84 | 84 | 84 | 84 | 86 |
| Children ages 5-17 | | | | | | | |
| Total | 77 | 80 | 80 | 80 | 79 | 79 | 81 |
| Poverty status | | | | | | | |
| Below poverty | 60 | 64 | 64 | 64 | 63 | 62 | 64 |
| At or above poverty | 81 | 84 | 83 | 83 | 82 | 82 | 85 |

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey, 1984-95.

**Table HEALTH2** Activity limitation: Percentage of children under age 18 with any limitation in activity resulting from chronic conditions[a] by age, gender, poverty status, race and Hispanic origin, selected years 1984-95

| Characteristic | 1984 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 |
|---|---|---|---|---|---|---|---|
| **Children ages 0-17** | | | | | | | |
| Total | 5.0 | 4.9 | 5.8 | 6.1 | 6.6 | 6.7 | 6.0 |
| Gender | | | | | | | |
| Male | 5.9 | 5.6 | 6.8 | 7.1 | 7.8 | 7.9 | 7.4 |
| Female | 4.0 | 4.2 | 4.7 | 5.0 | 5.3 | 5.6 | 4.6 |
| Poverty status | | | | | | | |
| Below poverty | 7.1 | 6.7 | 8.8 | 9.2 | 9.5 | 9.7 | 9.2 |
| At or above poverty | 4.4 | 4.6 | 5.1 | 5.3 | 5.9 | 6.0 | 5.4 |
| Race and Hispanic origin | | | | | | | |
| White, non-Hispanic | 4.9 | 5.0 | 5.8 | 6.0 | 6.7 | 6.6 | 6.0 |
| Black, non-Hispanic | 5.6 | 5.5 | 6.7 | 7.5 | 7.7 | 8.9 | 7.3 |
| Hispanic[b] | 4.7 | 4.1 | 5.5 | 5.3 | 5.6 | 5.7 | 5.8 |
| **Children ages 0-4** | | | | | | | |
| Total | 2.5 | 2.2 | 2.4 | 2.8 | 2.8 | 3.1 | 2.7 |
| Gender | | | | | | | |
| Male | 2.7 | 2.6 | 2.7 | 3.3 | 3.1 | 3.4 | 3.3 |
| Female | 2.3 | 1.7 | 2.1 | 2.2 | 2.5 | 2.7 | 2.0 |
| Poverty status | | | | | | | |
| Below poverty | 4.0 | 3.0 | 4.3 | 4.5 | 4.3 | 5.2 | 3.9 |
| At or above poverty | 2.0 | 2.0 | 2.0 | 2.3 | 2.4 | 2.5 | 2.4 |
| Race and Hispanic origin | | | | | | | |
| White, non-Hispanic | 2.3 | 2.1 | 2.4 | 2.5 | 2.4 | 2.7 | 2.7 |
| Black, non-Hispanic | 3.3 | 2.9 | 3.2 | 4.2 | 4.7 | 5.0 | 3.5 |
| Hispanic[b] | 2.5 | 2.0 | 1.8 | 2.5 | 2.7 | 3.1 | 2.5 |
| **Children ages 5-17** | | | | | | | |
| Total | 6.1 | 6.1 | 7.2 | 7.5 | 8.1 | 8.2 | 7.4 |
| Gender | | | | | | | |
| Male | 7.3 | 6.9 | 8.5 | 8.7 | 9.8 | 9.7 | 9.0 |
| Female | 4.8 | 5.2 | 5.9 | 6.2 | 6.4 | 6.7 | 5.6 |
| Poverty status | | | | | | | |
| Below poverty | 8.7 | 8.5 | 11.0 | 11.7 | 12.2 | 11.9 | 11.8 |
| At or above poverty | 5.5 | 5.6 | 6.4 | 6.6 | 7.2 | 7.4 | 6.5 |
| Race and Hispanic origin | | | | | | | |
| White, non-Hispanic | 6.0 | 6.2 | 7.1 | 7.4 | 8.4 | 8.1 | 7.2 |
| Black, non-Hispanic | 6.7 | 6.7 | 8.2 | 9.0 | 9.0 | 10.6 | 8.9 |
| Hispanic[b] | 5.8 | 5.1 | 7.2 | 6.7 | 7.1 | 7.0 | 7.5 |

[a] Chronic conditions usually have a duration of more than 3 months, e.g., asthma, hearing impairment, diabetes. Persons are not classified as limited in activity unless one or more chronic conditions are reported as the cause of the limitation.

[b] Persons of Hispanic origin may be of any race.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Health Interview Survey, 1984-95.



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**Table HEALTH3** Percentage[a] of low-birthweight births[b] by detailed race and Hispanic origin,[c] selected years 1980-96

| Race and Hispanic origin | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996* |
|---|---|---|---|---|---|---|---|---|---|
| Total | 6.8 | 6.8 | 7.0 | 7.1 | 7.1 | 7.2 | 7.3 | 7.3 | 7.4 |
| Race and Hispanic origin | | | | | | | | | |
| White | 5.7 | 5.7 | 5.7 | 5.8 | 5.8 | 6.0 | 6.1 | 6.2 | 6.3 |
| Black | 12.7 | 12.6 | 13.3 | 13.6 | 13.3 | 13.3 | 13.2 | 13.1 | 13.0 |
| American Indian/Alaska Native | 6.4 | 5.9 | 6.1 | 6.2 | 6.2 | 6.4 | 6.5 | 6.6 | — |
| Asian/Pacific Islander | 6.7 | 6.2 | 6.5 | 6.5 | 6.6 | 6.6 | 6.8 | 6.9 | — |
| Chinese | 5.2 | 5.0 | 4.7 | 5.1 | 5.0 | 4.9 | 4.8 | 5.3 | — |
| Japanese | 6.6 | 6.2 | 6.2 | 5.9 | 7.0 | 6.5 | 6.9 | 7.3 | — |
| Filipino | 7.4 | 7.0 | 7.3 | 7.3 | 7.4 | 7.0 | 7.8 | 7.8 | — |
| Hawaiian and part Hawaiian | — | — | 7.2 | 6.7 | 6.9 | 6.8 | 7.2 | 6.8 | — |
| Other Asian or Pacific Islander | — | — | 6.7 | 6.7 | 6.7 | 6.9 | 7.1 | 7.1 | — |
| Hispanic[c] | 6.1 | 6.2 | 6.1 | 6.2 | 6.1 | 6.2 | 6.3 | 6.3 | 6.3 |
| Mexican American | 5.6 | 5.8 | 5.6 | 5.6 | 5.6 | 5.8 | 5.8 | 5.8 | — |
| Puerto Rican | 9.0 | 8.7 | 9.0 | 9.4 | 9.2 | 9.2 | 9.1 | 9.4 | — |
| Cuban | 5.6 | 6.0 | 5.7 | 5.6 | 6.1 | 6.2 | 6.3 | 6.5 | — |
| Central and South American | 5.8 | 5.7 | 5.8 | 5.9 | 5.8 | 5.9 | 6.0 | 6.2 | — |
| Other and unknown Hispanic | 7.0 | 6.8 | 6.9 | 7.3 | 7.2 | 7.5 | 7.5 | 7.5 | — |

— = not available

* Preliminary data.

[a] Excludes live births with unknown birthweight.

[b] Low-birthweight infants weigh less than 2,500 grams at birth, about 5.5 pounds.

[c] Persons of Hispanic origin may be of any race.

NOTE: Trend data for Hispanics are affected by expansion of the reporting area in which an item on Hispanic origin is included on the birth certificate as well as by immigration. These two factors affect numbers of events, composition of the Hispanic population, and maternal and infant health characteristics. The number of States in the reporting area increased from 22 in 1980 to 23 and the District of Columbia (DC) in 1983-87, 30 and DC in 1988, 47 and DC in 1989, 48 and DC in 1990, 49 and DC in 1991-92, and 50 and DC in 1993-96.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System: Ventura, S.J., Martin, J.A., Curtin, S.C., and Mathews, T.J. (1997). Report of Final Natality Statistics, 1995. *Monthly Vital Statistics Report*, Vol. 45, No. 11, Supp. 2. Hyattsville, MD: National Center for Health Statistics. Ventura, S.J., Peters, K.D., Martin, J.A., and Maurer, J.D. (1997). Births and Deaths: United States, 1996. *Monthly Vital Statistics Report*, Vol. 46, No. 1, Supp. 2. Hyattsville, MD: National Center for Health Statistics. National Center for Health Statistics. (1997). *Health, United States, 1996-97*. Hyattsville, MD: National Center for Health Statistics.

## Table HEALTH4.A Infant mortality rates[a] by race of mother, selected years 1980-96

(Infant deaths per 1,000 live births)

| Race | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996* |
|---|---|---|---|---|---|---|---|---|---|
| Total | 12.6 | 10.6 | 9.2 | 8.9 | 8.5 | 8.4 | 8.0 | 7.6 | 7.2 |
| Race | | | | | | | | | |
| White | 10.9 | 9.2 | 7.6 | 7.3 | 6.9 | 6.8 | 6.6 | 6.3 | 6.0 |
| Black | 22.2 | 19.0 | 18.0 | 17.6 | 16.8 | 16.5 | 15.8 | 15.1 | 14.2 |

* Preliminary data.

[a] Rates are infant (under 1 year of age) deaths per 1,000 live births in specified group.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System.

## Table HEALTH4.B Infant mortality rates[a] among selected groups by detailed race and Hispanic origin of mother, selected years 1983-95

(Infant deaths per 1,000 live births)

| Race and Hispanic origin | 1983-85 | 1986-88 | 1989-91 | 1995[b] |
|---|---|---|---|---|
| Total | 10.6 | 9.8 | 9.0 | 7.6 |
| Race and Hispanic origin | | | | |
| White | 9.0 | 8.2 | 7.4 | 6.3 |
| Black | 18.7 | 17.9 | 17.1 | 14.6 |
| American Indian/Alaska Native | 13.9 | 13.2 | 12.6 | 9.0 |
| Asian/Pacific Islander | 8.3 | 7.3 | 6.6 | 5.3 |
| Chinese | 7.4 | 5.8 | 5.1 | 3.8 |
| Japanese | 6.0 | 6.9 | 5.3 | 5.3 |
| Filipino | 8.2 | 6.9 | 6.4 | 5.6 |
| Hawaiian and part Hawaiian | 11.3 | 11.1 | 9.0 | 6.5 |
| Other Asian or Pacific Islander | 8.6 | 7.6 | 7.0 | 5.5 |
| Hispanic[c,d] | 9.2 | 8.3 | 7.6 | 6.3 |
| Mexican American | 8.8 | 7.9 | 7.2 | 6.0 |
| Puerto Rican | 12.3 | 11.1 | 10.4 | 8.9 |
| Cuban | 8.0 | 7.3 | 6.2 | 5.3 |
| Central and South American | 8.2 | 7.6 | 6.6 | 5.5 |
| Other and unknown Hispanic | 9.9 | 9.0 | 8.2 | 7.4 |

[a] Rates are infant (under 1 year of age) deaths per 1,000 live births in specified group.

[b] Beginning with data for 1995, rates are on period basis. Earlier rates are on a cohort basis.

[c] Persons of Hispanic origin may be of any race.

[d] Trend data for Hispanics are affected by expansion of the reporting area in which an item on Hispanic origin is included on the birth certificate as well as by immigration. These two factors affect numbers of events, composition of the Hispanic population, and maternal and infant health characteristics. The number of States in the reporting area increased from 22 in 1980 to 23 and the District of Columbia (DC) in 1983-87, to 30 and DC in 1988, 47 and DC in 1989, 48 and DC in 1990, 49 and DC in 1991, and 50 and DC in 1995.

NOTE: Rates for race groups from the National Linked Files of Live Births and Infant Deaths vary slightly from those obtained via unlinked infant death records using the National Vital Statistics System because the race reported on the death certificate sometimes does not match the race on the infant's birth certificate. Rates obtained from linked data (where race is obtained from the birth, rather than the death, certificate) are considered more reliable, but linked data are not available for all years.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System, National Linked Files of Live Births and Infant Deaths.

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**Table HEALTH5** Child immunization: Percentage of children ages 19 to 35 months vaccinated for selected diseases by poverty status, race, and Hispanic origin, 1994-96

| Vaccination type | Total | | | Below poverty | | | At or above poverty | | |
|---|---|---|---|---|---|---|---|---|---|
| | 1994 | 1995 | 1996 | 1994 | 1995 | 1996 | 1994 | 1995 | 1996 |
| **Total** | | | | | | | | | |
| Combined series (4:3:1:3)[a] | 69 | 74 | 77 | 61 | 66 | 69 | 72 | 77 | 80 |
| Combined series (4:3:1)[b] | 75 | 76 | 78 | 66 | 68 | 71 | 77 | 79 | 81 |
| DTP (4 doses or more)[c] | 77 | 79 | 81 | 68 | 71 | 73 | 79 | 81 | 84 |
| Polio (3 doses or more) | 83 | 88 | 91 | 77 | 84 | 88 | 85 | 89 | 92 |
| Measles-containing[d] | 89 | 90 | 91 | 87 | 85 | 87 | 90 | 91 | 92 |
| Hib (3 doses or more)[e] | 86 | 92 | 92 | 81 | 88 | 88 | 88 | 93 | 93 |
| Hepatitis B (3 doses or more)[f] | 36 | 68 | 82 | 24 | 64 | 78 | 41 | 69 | 83 |
| **White, non-Hispanic** | | | | | | | | | |
| Combined series (4:3:1:3)[a] | 72 | 77 | 79 | — | — | 68 | — | — | 81 |
| Combined series (4:3:1)[b] | 78 | 79 | 80 | — | — | 70 | — | — | 82 |
| DTP (4 doses or more)[c] | 80 | 81 | 83 | — | — | 72 | — | — | 85 |
| Polio (3 doses or more) | 85 | 89 | 92 | — | — | 88 | — | — | 93 |
| Measles-containing[d] | 90 | 91 | 92 | — | — | 86 | — | — | 93 |
| Hib (3 doses or more)[e] | 87 | 93 | 93 | — | — | 87 | — | — | 94 |
| Hepatitis B (3 doses or more)[f] | 40 | 68 | 82 | — | — | 75 | — | — | 83 |
| **Black, non-Hispanic** | | | | | | | | | |
| Combined series (4:3:1:3)[a] | 67 | 70 | 74 | — | — | 70 | — | — | 78 |
| Combined series (4:3:1)[b] | 70 | 72 | 76 | — | — | 73 | — | — | 80 |
| DTP (4 doses or more)[c] | 72 | 74 | 79 | — | — | 75 | — | — | 82 |
| Polio (3 doses or more) | 79 | 84 | 90 | — | — | 88 | — | — | 92 |
| Measles-containing[d] | 86 | 86 | 89 | — | — | 88 | — | — | 91 |
| Hib (3 doses or more)[e] | 85 | 89 | 90 | — | — | 87 | — | — | 92 |
| Hepatitis B (3 doses or more)[f] | 29 | 65 | 82 | — | — | 79 | — | — | 86 |
| **Hispanic[g]** | | | | | | | | | |
| Combined series (4:3:1:3)[a] | 62 | 69 | 71 | — | — | 68 | — | — | 74 |
| Combined series (4:3:1)[b] | 68 | 72 | 73 | — | — | 70 | — | — | 75 |
| DTP (4 doses or more)[c] | 70 | 75 | 77 | — | — | 73 | — | — | 79 |
| Polio (3 doses or more) | 81 | 87 | 89 | — | — | 88 | — | — | 90 |
| Measles-containing[d] | 88 | 88 | 88 | — | — | 88 | — | — | 89 |
| Hib (3 doses or more)[e] | 84 | 90 | 89 | — | — | 88 | — | — | 90 |
| Hepatitis B (3 doses or more)[f] | 33 | 69 | 80 | — | — | 79 | — | — | 82 |

— = not available

[a] The 4:3:1:3 combined series consists of 4 doses of diphtheria and tetanus toxoids and pertussis vaccine (DTP), 3 doses of poliovirus vaccine, 1 dose of a measles-containing vaccine, and 3 doses of Haemophilus influenzae type b (Hib) vaccine.

[b] The 4:3:1 combined series consists of 4 doses of diphtheria and tetanus toxoids and pertussis vaccine (DTP), 3 doses of poliovirus vaccine, and 1 dose of a measles-containing vaccine.

[c] Diphtheria and tetanus toxoids and pertussis vaccine.

[d] Respondents were asked about measles-containing or MMR (measles-mumps-rubella) vaccines.

[e] Haemophilus influenzae type b (Hib) vaccine.

[f] The percent of children 19 to 35 months of age who received 3 doses of Hepatitis B vaccine was artificially low in 1994, because universal infant vaccination with a 3-dose series was not recommended until November 1991.

[g] Persons of Hispanic origin may be of any race.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics and National Immunization Program. Data from the National Immunization Survey.

**Table HEALTH6** Child mortality rates by age, gender, race, and Hispanic origin, selected years 1980-96

(Deaths per 100,000 children in each age group)

| Characteristic | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996* |
|---|---|---|---|---|---|---|---|---|---|
| Ages 1-4 | | | | | | | | | |
| Total[a] | 63.9 | 51.8 | 46.8 | 47.4 | 43.6 | 44.8 | 42.9 | 40.6 | 38.5 |
| Gender | | | | | | | | | |
| Male | 72.6 | 58.5 | 52.4 | 52.0 | 48.0 | 49.5 | 47.3 | 44.8 | 42.7 |
| Female | 54.7 | 44.8 | 41.0 | 42.7 | 39.0 | 39.9 | 38.2 | 36.2 | 34.1 |
| Race and Hispanic origin | | | | | | | | | |
| White | 57.9 | 46.6 | 41.1 | 41.7 | 38.1 | 38.3 | 36.5 | 35.1 | 32.9 |
| Black | 97.6 | 80.7 | 76.8 | 79.7 | 73.2 | 79.1 | 77.2 | 70.3 | 68.0 |
| Asian/Pacific Islander | 43.2 | 40.1 | 38.6 | 30.4 | 26.9 | 30.5 | 25.3 | 25.4 | 27.0 |
| Hispanic[b,c] | — | 46.1 | 43.5 | 43.6 | 41.7 | 42.0 | 39.1 | 36.7 | 32.9 |
| Ages 5-14 | | | | | | | | | |
| Total[a] | 30.6 | 26.5 | 24.0 | 23.6 | 22.5 | 23.4 | 22.5 | 22.5 | 21.9 |
| Gender | | | | | | | | | |
| Male | 36.7 | 31.8 | 28.5 | 28.7 | 27.2 | 27.4 | 26.9 | 26.7 | 25.8 |
| Female | 24.2 | 21.0 | 19.3 | 18.3 | 17.5 | 19.1 | 17.9 | 18.2 | 17.9 |
| Race and Hispanic origin | | | | | | | | | |
| White | 29.1 | 25.0 | 22.3 | 22.0 | 20.6 | 21.4 | 20.3 | 20.6 | 20.1 |
| Black | 39.0 | 35.5 | 34.4 | 34.2 | 33.7 | 35.0 | 34.8 | 33.4 | 32.5 |
| Asian/Pacific Islander | 24.2 | 20.8 | 16.9 | 15.1 | 16.1 | 17.1 | 16.3 | 16.8 | 15.0 |
| Hispanic[b,c] | — | 19.3 | 20.0 | 20.0 | 21.0 | 22.6 | 20.1 | 20.5 | 20.5 |

— = not available.

*Preliminary data.

[a] Total includes American Indians and Alaska Natives. Death rates for American Indians and Alaska Natives are not shown separately, because the numbers of deaths were too small for the calculation of reliable rates.

[b] Persons of Hispanic origin may be of any race.

[c] Trend data for Hispanics are affected by expansion of the reporting area in which an item on Hispanic origin is included on the death certificate as well as by immigration. These two factors affect numbers of events, composition of the Hispanic population, and health characteristics. Tabulations are restricted to a subset of the States with the item on the death certificate and that meet a minimal quality standard. The quality of reporting has improved substantially over time, so that the minimal quality standard was relaxed in 1992 to those areas reporting Hispanic origin on at least 80 percent of records. The number of States in the reporting area increased from 15 in 1984; 17 and the District of Columbia (DC) in 1985; 18 and DC in 1986-87; 26 and DC in 1988; 41 and DC in 1989; 45, New York State (excluding New York City), and DC in 1990; 47, New York State (excluding New York City), and DC in 1991; 48 and DC in 1992; and 49 and DC in 1993-96. The population data in 1990 and 1991 do not exclude New York City.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System.

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**Table HEALTH7.A** Mortality rates among adolescents ages 15 to 19 by gender, race, and cause of death, selected years 1980-95

(Deaths per 100,000 adolescents ages 15-19)

| Characteristic | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 |
|---|---|---|---|---|---|---|---|---|
| **Total, all races** | | | | | | | | |
| All causes | 97.9 | 80.5 | 87.9 | 89.0 | 84.3 | 86.9 | 86.8 | 83.5 |
| Injuries | 78.1 | 62.9 | 71.0 | 71.7 | 67.2 | 69.7 | 69.5 | 66.1 |
| Motor vehicle | 42.3 | 33.1 | 32.8 | 30.9 | 27.8 | 28.3 | 29.0 | 28.3 |
| All firearm | 14.7 | 13.3 | 23.3 | 26.4 | 26.2 | 27.8 | 28.2 | 24.5 |
| Firearm homicide | 7.0 | 5.7 | 13.8 | 16.4 | 16.7 | 17.8 | 17.7 | 15.4 |
| Firearm suicide | 5.4 | 6.0 | 7.4 | 7.4 | 7.3 | 7.4 | 7.8 | 7.0 |
| **Male, white** | | | | | | | | |
| All causes | 142.7 | 112.3 | 115.4 | 112.2 | 106.0 | 107.6 | 108.4 | 105.2 |
| Injuries | 121.1 | 93.2 | 96.7 | 93.5 | 87.1 | 89.3 | 89.9 | 86.1 |
| Motor vehicle | 67.8 | 50.4 | 48.7 | 44.0 | 38.9 | 41.1 | 41.2 | 38.4 |
| All firearm | 20.9 | 18.4 | 26.2 | 29.1 | 28.8 | 28.8 | 30.2 | 27.9 |
| Firearm homicide | 7.2 | 4.9 | 9.4 | 11.7 | 12.9 | 12.6 | 12.9 | 12.3 |
| Firearm suicide | 9.8 | 10.8 | 13.4 | 13.6 | 12.8 | 13.0 | 13.3 | 12.6 |
| **Male, black** | | | | | | | | |
| All causes | 134.5 | 125.5 | 199.7 | 227.9 | 218.4 | 231.7 | 231.8 | 202.4 |
| Injuries | 105.3 | 96.7 | 174.0 | 199.3 | 189.7 | 203.5 | 201.9 | 171.3 |
| Motor vehicle | 24.3 | 21.9 | 28.5 | 29.3 | 26.1 | 26.5 | 28.7 | 28.9 |
| All firearm | 46.7 | 46.5 | 119.7 | 140.4 | 140.9 | 153.1 | 151.1 | 120.3 |
| Firearm homicide | 38.4 | 36.6 | 104.4 | 122.5 | 118.8 | 130.1 | 126.6 | 101.7 |
| Firearm suicide | 3.4 | 5.4 | 8.8 | 9.0 | 12.6 | 11.5 | 13.9 | 10.6 |
| **Female, white** | | | | | | | | |
| All causes | 53.7 | 46.6 | 45.4 | 46.9 | 43.3 | 44.6 | 43.2 | 44.2 |
| Injuries | 37.9 | 33.0 | 32.8 | 33.7 | 31.0 | 31.3 | 30.7 | 31.8 |
| Motor vehicle | 25.4 | 22.4 | 22.1 | 22.8 | 20.8 | 20.2 | 21.1 | 21.9 |
| All firearm | 4.1 | 3.5 | 4.6 | 4.6 | 4.3 | 4.9 | 4.7 | 4.2 |
| Firearm homicide | 1.7 | 1.2 | 2.0 | 2.1 | 2.3 | 2.2 | 2.4 | 2.2 |
| Firearm suicide | 1.9 | 2.0 | 2.3 | 2.1 | 1.7 | 2.3 | 2.1 | 1.7 |
| **Female, black** | | | | | | | | |
| All causes | 50.3 | 44.6 | 54.3 | 52.3 | 50.5 | 53.3 | 55.8 | 56.1 |
| Injuries | 25.5 | 22.9 | 30.8 | 30.1 | 28.3 | 31.4 | 30.7 | 32.4 |
| Motor vehicle | 6.6 | 7.5 | 9.7 | 8.9 | 9.0 | 8.2 | 10.4 | 10.7 |
| All firearm | 7.5 | 6.1 | 12.1 | 12.7 | 12.4 | 15.8 | 13.3 | 14.2 |
| Firearm homicide | 6.2 | 5.0 | 10.4 | 11.2 | 10.5 | 14.3 | 11.1 | 12.3 |
| Firearm suicide | 0.6 | 0.7 | 1.3 | 0.8 | 1.3 | 0.7 | 1.9 | 1.7 |

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System

**Table HEALTH7.B** Injury mortality rates among adolescents ages 15 to 19 by cause of death, 1994-95

(Deaths per 100,000 adolescents ages 15-19)

| Gender, race, and Hispanic origin | All motor vehicle injuries | All firearm injuries |
|---|---|---|
| Males | | |
| White, non-Hispanic | 39.8 | 21.1 |
| Black | 28.8 | 135.4 |
| Hispanic[a] | 34.1 | 70.0 |
| Females | | |
| White, non-Hispanic | 22.6 | 3.9 |
| Black | 10.5 | 13.8 |
| Hispanic[a] | 12.5 | 6.8 |

[a] Persons of Hispanic origin may be of any race.

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System.

**Table HEALTH8** Adolescent birth rates by age, race, and Hispanic origin, selected years 1980-96

(Live births per 1,000 females ages 15-17)

| Characteristic | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996* |
|---|---|---|---|---|---|---|---|---|---|
| All races | | | | | | | | | |
| Ages 10-14 | 1.1 | 1.2 | 1.4 | 1.4 | 1.4 | 1.4 | 1.4 | 1.3 | 1.2 |
| Ages 15-17 | 32.5 | 31.0 | 37.5 | 38.7 | 37.8 | 37.8 | 37.6 | 36.0 | 34.0 |
| Ages 18-19 | 82.1 | 79.6 | 88.6 | 94.4 | 94.5 | 92.1 | 91.5 | 89.1 | 86.5 |
| Ages 15-19 | 53.0 | 51.0 | 59.9 | 62.1 | 60.7 | 59.6 | 58.9 | 56.8 | 54.7 |
| White, total | | | | | | | | | |
| Ages 10-14 | 0.6 | 0.6 | 0.7 | 0.8 | 0.8 | 0.8 | 0.8 | 0.8 | 0.8 |
| Ages 15-17 | 25.5 | 24.4 | 29.5 | 30.7 | 30.1 | 30.3 | 30.7 | 30.0 | 28.6 |
| Ages 18-19 | 73.2 | 70.4 | 78.0 | 83.5 | 83.8 | 82.1 | 82.1 | 81.2 | 78.8 |
| Ages 15-19 | 45.4 | 43.3 | 50.8 | 52.8 | 51.8 | 51.1 | 51.1 | 50.1 | 48.4 |
| White, non-Hispanic | | | | | | | | | |
| Ages 10-14 | 0.4 | — | 0.5 | 0.5 | 0.5 | 0.5 | 0.5 | 0.4 | — |
| Ages 15-17 | 22.4 | — | 23.2 | 23.6 | 22.7 | 22.7 | 22.8 | 22.0 | — |
| Ages 18-19 | 67.7 | — | 66.6 | 70.5 | 69.8 | 67.7 | 67.4 | 66.1 | — |
| Ages 15-19 | 41.2 | — | 42.5 | 43.4 | 41.7 | 40.7 | 40.4 | 39.3 | — |
| Black | | | | | | | | | |
| Ages 10-14 | 4.3 | 4.5 | 4.9 | 4.8 | 4.7 | 4.6 | 4.6 | 4.2 | 3.7 |
| Ages 15-17 | 72.5 | 69.3 | 82.3 | 84.1 | 81.3 | 79.8 | 76.3 | 69.7 | 64.9 |
| Ages 18-19 | 135.1 | 132.4 | 152.9 | 158.6 | 157.9 | 151.9 | 148.3 | 137.1 | 133.0 |
| Ages 15-19 | 97.8 | 95.4 | 112.8 | 115.5 | 112.4 | 108.6 | 104.5 | 96.1 | 91.7 |
| American Indian/Alaska Native | | | | | | | | | |
| Ages 10-14 | 1.9 | 1.7 | 1.6 | 1.6 | 1.6 | 1.4 | 1.9 | 1.8 | 1.8 |
| Ages 15-17 | 51.5 | 47.7 | 48.5 | 52.7 | 53.8 | 53.7 | 51.3 | 47.8 | 47.0 |
| Ages 18-19 | 129.5 | 124.1 | 129.3 | 134.3 | 132.6 | 130.7 | 130.3 | 130.7 | 124.3 |
| Ages 15-19 | 82.2 | 79.2 | 81.1 | 85.0 | 84.4 | 83.1 | 80.8 | 78.0 | 75.1 |
| Asian/Pacific Islander | | | | | | | | | |
| Ages 10-14 | 0.3 | 0.4 | 0.7 | 0.8 | 0.7 | 0.6 | 0.7 | 0.7 | 0.6 |
| Ages 15-17 | 12.0 | 12.5 | 16.0 | 16.1 | 15.2 | 16.0 | 16.1 | 15.4 | 15.6 |
| Ages 18-19 | 46.2 | 40.8 | 40.2 | 43.1 | 43.1 | 43.3 | 44.1 | 43.4 | 41.5 |
| Ages 15-19 | 26.2 | 23.8 | 26.4 | 27.4 | 26.6 | 27.0 | 27.1 | 26.1 | 25.4 |
| Hispanic[a,b] | | | | | | | | | |
| Ages 10-14 | 1.7 | — | 2.4 | 2.4 | 2.6 | 2.7 | 2.7 | 2.7 | 2.6 |
| Ages 15-17 | 52.1 | — | 65.9 | 70.6 | 71.4 | 71.7 | 74.0 | 72.9 | 68.9 |
| Ages 18-19 | 126.9 | — | 147.7 | 158.5 | 159.7 | 159.1 | 158.0 | 157.9 | 150.7 |
| Ages 15-19 | 82.2 | — | 100.3 | 106.7 | 107.1 | 106.8 | 107.7 | 106.7 | 101.6 |

— = not available

* Preliminary data.

[a] Persons of Hispanic origin may be of any race.

[b] Trend data for Hispanics are affected by expansion of the reporting area in which an item on Hispanic origin is included on the birth certificate as well as by immigration. These two factors affect numbers of events, composition of the Hispanic population, and maternal and infant health characteristics. The number of States in the reporting area increased from 22 in 1980 to 23 and the District of Columbia (DC) in 1983-87, 30 and DC in 1988, 47 and DC in 1989, 48 and DC in 1990, 49 and DC in 1991-92, and 50 and DC in 1993.

NOTE: Rates in 1981-89 were not calculated for Hispanics and non-Hispanic whites because estimates for populations were not available.
SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System, Ventura, S.J., Martin, J.A., Curtin, S.C., and Mathews, T.J. (1997). Report of Final Natality Statistics, 1995. *Monthly Vital Statistics Report;* Vol. 45, No. 11, Supp. 1. Hyattsville, MD: National Center for Health Statistics. Ventura, S.J., Peters, K.D., Martin, J.A., and Maurer, J.D. (1997). Births and deaths: United States, 1996. *Monthly Vital Statistics Report;* Vol. 46, No. 1, Supp. 2. Hyattsville, MD: National Center for Health Statistics. Mathews, T.J., Ventura, S.J., Curtin, S.C., and Martin, J.A. (In press 1988). Births of Hispanic Origin, 1989-95. *Monthly Vital Statistics Report;* Vol. 46.



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**Table BEH1** Cigarette smoking: Percentage of students who reported smoking cigarettes daily in the previous 30 days by grade, gender, race, and Hispanic origin, selected years 1980-97

| Characteristic | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996 | 1997 |
|---|---|---|---|---|---|---|---|---|---|---|
| 8th graders | | | | | | | | | | |
| Total | — | — | — | 7.2 | 7.0 | 8.3 | 8.8 | 9.3 | 10.4 | 9.0 |
| Gender | | | | | | | | | | |
| Male | — | — | — | 8.1 | 6.9 | 8.8 | 9.5 | 9.2 | 10.5 | 9.0 |
| Female | — | — | — | 6.2 | 7.2 | 7.8 | 8.0 | 9.2 | 10.1 | 8.7 |
| Race and Hispanic origin[a] | | | | | | | | | | |
| White | — | — | — | — | 7.7 | 8.8 | 9.7 | 10.5 | 11.7 | 11.4 |
| Black | — | — | — | — | 1.4 | 1.8 | 2.6 | 2.8 | 3.2 | 3.7 |
| Hispanic[b] | — | — | — | — | 7.3 | 7.2 | 9.0 | 9.2 | 8.0 | 8.1 |
| 10th graders | | | | | | | | | | |
| Total | — | — | — | 12.6 | 12.3 | 14.2 | 14.6 | 16.3 | 18.3 | 18.0 |
| Gender | | | | | | | | | | |
| Male | — | — | — | 12.4 | 12.1 | 13.8 | 15.2 | 16.3 | 18.1 | 17.2 |
| Female | — | — | — | 12.5 | 12.4 | 14.3 | 13.7 | 16.1 | 18.6 | 18.5 |
| Race and Hispanic origin[a] | | | | | | | | | | |
| White | — | — | — | — | 14.5 | 15.3 | 16.5 | 17.6 | 20.0 | 21.4 |
| Black | — | — | — | — | 2.8 | 3.1 | 3.8 | 4.7 | 5.1 | 5.6 |
| Hispanic[b] | — | — | — | — | 8.4 | 8.9 | 8.1 | 9.9 | 11.6 | 10.8 |
| 12th graders | | | | | | | | | | |
| Total | 21.3 | 19.5 | 19.1 | 18.5 | 17.2 | 19.0 | 19.4 | 21.6 | 22.2 | 24.6 |
| Gender | | | | | | | | | | |
| Male | 18.5 | 17.8 | 18.6 | 18.8 | 17.2 | 19.4 | 20.4 | 21.7 | 22.2 | 24.8 |
| Female | 23.5 | 20.6 | 19.3 | 17.9 | 16.7 | 18.2 | 18.1 | 20.8 | 21.8 | 23.6 |
| Race and Hispanic origin[a] | | | | | | | | | | |
| White | 23.9 | 20.4 | 21.8 | 21.5 | 20.5 | 21.4 | 22.9 | 23.9 | 25.4 | 27.8 |
| Black | 17.4 | 9.9 | 5.8 | 5.1 | 4.2 | 4.1 | 4.9 | 6.1 | 7.0 | 7.2 |
| Hispanic[b] | 12.8 | 11.8 | 10.9 | 11.5 | 12.5 | 11.8 | 10.6 | 11.6 | 12.9 | 14.0 |

— = not available

[a] Estimates for race and Hispanic origin represent the mean of the specified year and the previous year. Data have been combined to increase subgroup sample sizes, thus providing more stable estimates.

[b] Persons of Hispanic origin may be of any race.

SOURCE: Johnston, L.D., O'Malley, P.M., and Bachman, J.G. (1997). *National Survey Results on Drug Use from the Monitoring the Future Study, 1975-1995.* Rockville, MD: National Institutes of Health, National Institute on Drug Abuse, NIH Pub. No. 97-4139, Institute for Social Research, the University of Michigan. Tables D-31 and D-32. Data are from the 1997 study, "Monitoring the Future," University of Michigan, Press release of December 20, 1997.

**Table BEH2** Heavy drinking: Percentage of students who reported having five or more drinks in a row in the past 2 weeks by grade, gender, race, and Hispanic origin, selected years 1980-97

| Characteristic | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996 | 1997 |
|---|---|---|---|---|---|---|---|---|---|---|
| 8th graders | | | | | | | | | | |
| Total | — | — | — | 12.9 | 13.4 | 13.5 | 14.5 | 14.5 | 15.6 | 14.5 |
| Gender | | | | | | | | | | |
| Male | — | — | — | 14.3 | 13.9 | 14.8 | 16.0 | 15.1 | 16.5 | 15.3 |
| Female | — | — | — | 11.4 | 12.8 | 12.3 | 13.0 | 13.9 | 14.5 | 13.5 |
| Race and Hispanic origin[a] | | | | | | | | | | |
| White | — | — | — | — | 12.7 | 12.6 | 12.9 | 13.9 | 15.1 | 15.1 |
| Black | — | — | — | — | 9.6 | 10.7 | 11.8 | 10.8 | 10.4 | 10.4 |
| Hispanic[b] | — | — | — | — | 20.4 | 21.4 | 22.3 | 22.0 | 21.0 | 20.7 |
| 10th graders | | | | | | | | | | |
| Total | — | — | — | 22.9 | 21.1 | 23.0 | 23.6 | 24.0 | 24.8 | 25.1 |
| Gender | | | | | | | | | | |
| Male | — | — | — | 26.4 | 23.7 | 26.5 | 28.5 | 26.3 | 27.2 | 28.6 |
| Female | — | — | — | 19.5 | 18.6 | 19.3 | 18.7 | 21.5 | 22.3 | 21.7 |
| Race and Hispanic origin[a] | | | | | | | | | | |
| White | — | — | — | — | 23.2 | 23.0 | 24.5 | 25.4 | 26.2 | 26.9 |
| Black | — | — | — | — | 15.0 | 14.8 | 14.0 | 13.3 | 12.2 | 12.7 |
| Hispanic[b] | — | — | — | — | 22.9 | 23.8 | 24.2 | 26.8 | 29.6 | 27.5 |
| 12th graders | | | | | | | | | | |
| Total | 41.2 | 36.7 | 32.2 | 29.8 | 27.9 | 27.5 | 28.2 | 29.8 | 30.2 | 31.3 |
| Gender | | | | | | | | | | |
| Male | 52.1 | 45.3 | 39.1 | 37.8 | 35.6 | 34.6 | 37.0 | 36.9 | 37.0 | 37.9 |
| Female | 30.5 | 28.2 | 24.4 | 21.2 | 20.3 | 20.7 | 20.2 | 23.0 | 23.5 | 24.4 |
| Race and Hispanic origin[a] | | | | | | | | | | |
| White | 44.3 | 41.5 | 36.6 | 34.6 | 32.1 | 31.3 | 31.5 | 32.3 | 33.4 | 35.1 |
| Black | 17.7 | 15.7 | 14.4 | 11.7 | 11.3 | 12.6 | 14.4 | 14.9 | 15.3 | 13.4 |
| Hispanic[b] | 33.1 | 31.7 | 25.6 | 27.9 | 31.0 | 27.2 | 24.3 | 26.6 | 27.1 | 27.6 |

— = not available

[a] Estimates for race and Hispanic origin represent the mean of the specified year and the previous year. Data have been combined to increase subgroup sample sizes, thus providing more stable estimates.

[b] Persons of Hispanic origin may be of any race.

NOTE: Heavy drinking is defined as having five or more alcoholic drinks in a row in the 2 weeks prior to survey.

SOURCE: Johnston, L.D., O'Malley, P.M., and Bachman, J.G. (1996). National Survey Results on Drug Use from the Monitoring the Future Study, 1975-1995. Rockville, MD: National Institutes of Health. National Institute on Drug Abuse. NIH Pub. No. 96-4139. Institute for Social Research, University of Michigan. Tables D-31 and D-32. Data are from the study "Monitoring the Future," University of Michigan. Press release of December 20, 1997.

**Table BEH3** Illicit drug use: Percentage of students who have used illicit drugs in the previous 30 days by grade, gender, race, and Hispanic origin, selected years 1980-97

| Characteristic | 1980[a] | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996 | 1997 |
|---|---|---|---|---|---|---|---|---|---|---|
| 8th graders | | | | | | | | | | |
| Total | — | — | — | 5.7 | 6.8 | 8.4 | 10.9 | 12.4 | 14.6 | 12.9 |
| Gender | | | | | | | | | | |
| Male | — | — | — | 5.8 | 6.4 | 8.7 | 11.9 | 12.7 | 14.6 | 13.3 |
| Female | — | — | — | 5.4 | 7.1 | 8.1 | 9.6 | 11.9 | 14.1 | 12.3 |
| Race and Hispanic origin[b] | | | | | | | | | | |
| White | — | — | — | — | 5.9 | 7.1 | 8.7 | 18.9 | 13.2 | 13.7 |
| Black | — | — | — | — | 3.8 | 5.1 | 7.4 | 9.1 | 10.5 | 10.8 |
| Hispanic[c] | — | — | — | — | 10.2 | 12.3 | 15.7 | 16.7 | 16.5 | 15.9 |
| 10th graders | | | | | | | | | | |
| Total | — | — | — | 11.6 | 11.0 | 14.0 | 18.5 | 20.2 | 23.2 | 23.0 |
| Gender | | | | | | | | | | |
| Male | — | — | — | 12.1 | 11.3 | 15.2 | 20.5 | 21.1 | 24.3 | 24.8 |
| Female | — | — | — | 10.8 | 10.5 | 12.5 | 16.1 | 19.0 | 21.9 | 21.0 |
| Race and Hispanic origin[b] | | | | | | | | | | |
| White | — | — | — | — | 12.1 | 13.1 | 16.4 | 19.7 | 22.4 | 23.8 |
| Black | — | — | — | — | 5.2 | 6.1 | 11.4 | 15.5 | 17.0 | 17.7 |
| Hispanic[c] | — | — | — | — | 12.7 | 15.0 | 18.0 | 20.6 | 22.5 | 24.2 |
| 12th graders | | | | | | | | | | |
| Total | 37.2 | 29.7 | 17.2 | 16.4 | 14.4 | 18.3 | 21.9 | 23.8 | 24.6 | 26.2 |
| Gender | | | | | | | | | | |
| Male | — | — | 18.9 | 18.4 | 15.9 | 20.4 | 25.5 | 26.8 | 27.5 | 28.7 |
| Female | — | — | 15.2 | 14.1 | 12.7 | 15.9 | 18.3 | 20.4 | 21.2 | 23.2 |
| Race and Hispanic origin[b] | | | | | | | | | | |
| White | 38.8 | 30.2 | 20.5 | 18.6 | 16.8 | 17.8 | 21.4 | 23.8 | 24.8 | 26.4 |
| Black | 28.8 | 22.9 | 9.0 | 7.2 | 7.3 | 9.1 | 14.3 | 18.3 | 19.7 | 20.0 |
| Hispanic[c] | 33.1 | 27.2 | 13.9 | 14.7 | 14.6 | 15.6 | 18.3 | 21.4 | 22.6 | 23.9 |

— = not available

[a] Beginning in 1982, the question about stimulant use (i.e. amphetamines) was revised to get respondents to exclude the inappropriate reporting of non-prescription stimulants. The prevalence rate dropped substantially as a result of this methodological change.

[b] Estimates for race and Hispanic origin represent the mean of the specified year and the previous year. Data have been combined to increase subgroup sample sizes, thus providing more stable estimates.

[c] Persons of Hispanic origin may be of any race.

NOTE: Illicit drugs include marijuana, cocaine (including crack), heroin, hallucinogens (including PCP), inhalants, and nonmedical use of psychotherapeutics.

SOURCE: Johnston, L.D., O'Malley, P.M., and Bachman, J.G. (1996). *National Survey Results on Drug Use from the Monitoring the Future Study, 1975-1995.* Rockville, MD: National Institutes of Health. National Institute on Drug Abuse. NIH Pub. No. 96-4139. Institute for Social Research, University of Michigan. Tables 2-3-12, 3-3-12, 5-3-12, 9-3-12, and 8. Data are from the study "Monitoring the Future." University of Michigan. Press release of December 20, 1997, and unpublished data from "Monitoring the Future," University of Michigan.

**Table BEH4.A** Youth victims of serious violent crime: Number and rate of victimization for youths ages 12 to 17 by age, race, and gender, selected years 1980-96

| Characteristic | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996 |
|---|---|---|---|---|---|---|---|---|---|
| Rates per 1,000 youth ages 12-17 | | | | | | | | | |
| Total | 37.6 | 34.3 | 43.2 | 40.7 | 38.8 | 43.8 | 41.3 | 29.9 | 32.6 |
| Age | | | | | | | | | |
| Ages 12-14 | 33.4 | 28.1 | 41.2 | 37.8 | 37.6 | 38.0 | 34.5 | 27.8 | 29.1 |
| Ages 15-17 | 41.4 | 40.3 | 45.2 | 43.6 | 40.1 | 49.9 | 48.5 | 32.0 | 36.1 |
| Race | | | | | | | | | |
| White | 34.1 | 34.4 | 37.0 | 40.1 | 35.2 | 40.0 | 38.0 | 27.0 | 31.0 |
| Black | 60.2 | 35.2 | 77.0 | 48.0 | 54.3 | 71.5 | 62.9 | 45.3 | 39.3 |
| Other | 21.7 | 28.8 | 37.3 | 25.0 | 48.7 | 17.6 | 27.5 | 28.1 | 37.7 |
| Gender | | | | | | | | | |
| Male | 54.8 | 49.8 | 60.5 | 60.7 | 49.8 | 53.9 | 51.5 | 41.0 | 45.1 |
| Female | 19.7 | 18.2 | 24.9 | 19.6 | 27.2 | 33.1 | 30.6 | 18.2 | 19.3 |
| Number of victimizations of youth ages 12-17 | | | | | | | | | |
| Ages 12-17 | 877,104 | 742,815 | 866,272 | 825,895 | 809,118 | 933,763 | 905,353 | 668,001 | 738,955 |

NOTE: Serious violent crimes include aggravated assault, rape, robbery (stealing by force or threat of violence), and homicide. Because of changes made in the victimization survey, data prior to 1992 are adjusted to make them comparable with data collected under the redesigned methodology. Victimization rates were calculated using population estimates from the Bureau of the Census Current Population Reports. Such population estimates normally differ somewhat from population estimates derived from the victimization survey data. The rates may therefore differ marginally from rates based upon the victimization survey derived population estimates.

SOURCE: U.S. Department of Justice, Bureau of Justice Statistics, National Crime Victimization Survey, 1980-1996; Federal Bureau of Investigation, Uniform Crime Reports.

**Table BEH4.B** Serious violent juvenile crime rate: Number and rate of serious crimes involving youth ages 12 to 17, selected years 1980-96

| Characteristic | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996 |
|---|---|---|---|---|---|---|---|---|---|
| Rates per 1,000 youth ages 12-17 | | | | | | | | | |
| Total | 34.9 | 30.2 | 39.1 | 39.9 | 44.4 | 51.9 | 47.0 | 36.3 | 35.5 |
| Number of serious violent crimes | | | | | | | | | |
| Total (in thousands) | 3,806 | 3,358 | 3,501 | 3,712 | 3,987 | 4,191 | 4,116 | 3,290 | 3,259 |
| Number involving youth ages 12-17 (in thousands) | 812 | 652 | 785 | 811 | 925 | 1,108 | 1,031 | 812 | 805 |
| Percentage involving youth ages 12-17 | 21.3 | 19.4 | 22.4 | 21.8 | 23.2 | 26.4 | 25.0 | 24.7 | 24.7 |

NOTE: Serious violent crimes include aggravated assault, rape, robbery (stealing by force or threat of violence), and homicide. Because of changes made in the victimization survey, data prior to 1992 are adjusted to make them comparable with data collected under the redesigned methodology. Victimization rates were calculated using population estimates from the Bureau of the Census Current Population Reports. Such population estimates normally differ somewhat from population estimates derived from the victimization survey data. The rates may therefore differ marginally from rates based upon the victimization survey derived population estimates.

SOURCE: U.S. Department of Justice, Bureau of Justice Statistics, National Crime Victimization Survey, 1980-1996; Federal Bureau of Investigation, Uniform Crime Reports.

**Table ED1** Family reading: Percentage of children ages 3 to 5[a] who were read to every day in the last week by a family member by child and family characteristics, selected years 1993-96

| Characteristic | 1993 | 1995 | 1996 |
|---|---|---|---|
| Total | 53 | 58 | 57 |
| Gender | | | |
| Male | 51 | 57 | 56 |
| Female | 54 | 59 | 57 |
| Race and Hispanic origin | | | |
| White, non-Hispanic | 59 | 65 | 64 |
| Black, non-Hispanic | 39 | 43 | 44 |
| Hispanic[b] | 37 | 38 | 39 |
| Poverty status | | | |
| At or above poverty threshold | 56 | 62 | 61 |
| Below poverty threshold | 44 | 48 | 46 |
| Family type | | | |
| Two parents | 55 | 61 | 61 |
| One or no parent | 46 | 49 | 46 |
| Mother's education[c] | | | |
| Less than high school | 37 | 40 | 37 |
| High school/GED | 48 | 48 | 49 |
| Vocational/technical or some college | 57 | 64 | 62 |
| College graduate | 71 | 76 | 77 |
| Mother's employment status[c] | | | |
| Worked 35 hours or more per week | 52 | 55 | 54 |
| Worked less than 35 hours per week | 56 | 63 | 59 |
| Not in labor force | 55 | 60 | 59 |

[a] Estimates are based on children who have yet to enter kindergarten.

[b] Persons of Hispanic origin may be of any race.

[c] Children without mothers in the home are not included in estimates dealing with mother's education or mother's employment status.

SOURCE: U.S. Department of Education, National Center for Education Statistics, 1993, 1995, and 1996 National Household Education Survey.

**Table ED2.A** Early childhood education: Percentage of children ages 3 to 4[a] enrolled in preschool by race, Hispanic origin, and poverty status, selected years 1980-96

| Race and Hispanic origin, and income | 1980 | 1985 | 1990[b] | 1991 | 1992 | 1993 | 1994[b] | 1995[b] | 1996[b] |
|---|---|---|---|---|---|---|---|---|---|
| Total | 30 | 32 | 41 | 34 | 34 | 34 | 44 | 45 | 45 |
| Race and Hispanic origin | | | | | | | | | |
| White, non-Hispanic | 32 | 35 | 44 | 38 | 38 | 38 | 48 | 50 | 48 |
| Black, non-Hispanic | 28 | 28 | 37 | 27 | 29 | 30 | 45 | 42 | 45 |
| Hispanic[c] | 24 | 20 | 26 | 20 | 18 | 17 | 26 | 29 | 33 |
| Poverty status | | | | | | | | | |
| Below poverty | 21 | 19 | 29 | 22 | 23 | 23 | 36 | 34 | 34 |
| At or above poverty | 34 | 37 | 45 | 39 | 38 | 38 | 47 | 49 | 48 |

[a] Estimates based on children who have yet to enter kindergarten.

[b] Data for 1990 and 1994-96 may not be comparable with other years because of changes in survey procedures.

[c] Persons of Hispanic origin may be of any race.

SOURCE: U.S. Bureau of the Census, October Current Population Surveys. Tabulated by the U.S. Department of Education, National Center for Education Statistics.

**Table ED2.B** Early childhood education: Percentage of children ages 3 to 4[a] enrolled in center-based programs[b] by child and family characteristics, selected years 1991-96

| Characteristic | 1991 | 1993 | 1995 | 1996 |
|---|---|---|---|---|
| Total | 51 | 51 | 53 | 53 |
| **Gender** | | | | |
| Male | 51 | 50 | 52 | 52 |
| Female | 52 | 52 | 53 | 53 |
| **Race and Hispanic origin** | | | | |
| White, non-Hispanic | 53 | 52 | 55 | 54 |
| Black, non-Hispanic | 56 | 56 | 57 | 63 |
| Hispanic[c] | 38 | 42 | 34 | 37 |
| **Poverty status** | | | | |
| Above poverty | 54 | 55 | 58 | 58 |
| At or below poverty | 42 | 42 | 41 | 41 |
| **Family type** | | | | |
| Two parents | 52 | 51 | 53 | 51 |
| One or no parent | 47 | 52 | 53 | 56 |
| **Mother's education[d]** | | | | |
| Less than high school | 30 | 31 | 31 | 37 |
| High school/GED | 44 | 41 | 45 | 46 |
| Vocational/technical or some college | 59 | 58 | 55 | 55 |
| College graduate | 72 | 72 | 73 | 71 |
| **Mother's employment status[d]** | | | | |
| Worked 35 hours or more per week | 58 | 59 | 58 | 62 |
| Worked less than 35 hours per week | 57 | 55 | 60 | 62 |
| Not in labor force | 43 | 43 | 43 | 41 |

[a] Estimates are based on children who have yet to enter kindergarten.

[b] Center-based programs include day care centers, Head Start programs, preschool, nursery school, prekindergarten, and other early childhood programs.

[c] Persons of Hispanic origin may be of any race.

[d] Children without mothers in the home are not included in estimates dealing with mother's education or mother's employment status.

SOURCE: U.S. Department of Education, National Center for Education Statistics, 1991, 1993, 1995, and 1996 National Household Education Survey.

**Table ED3.A** Mathematics achievement: Average scale scores of students ages 9, 13, and 17 by age and child and family characteristics, selected years 1982-96

| Characteristic | 1982 | 1986 | 1990 | 1992 | 1994 | 1996 |
|---|---|---|---|---|---|---|
| Age 9 | | | | | | |
| Total | 219 | 222 | 230 | 230 | 231 | 231 |
| Gender | | | | | | |
| Male | 217 | 222 | 229 | 231 | 232 | 233 |
| Female | 221 | 222 | 230 | 228 | 230 | 229 |
| Race and Hispanic origin | | | | | | |
| White, non-Hispanic | 224 | 227 | 235 | 235 | 237 | 237 |
| Black, non-Hispanic | 195 | 202 | 208 | 208 | 212 | 212 |
| Hispanic[a] | 204 | 205 | 214 | 212 | 210 | 215 |
| Age 13 | | | | | | |
| Total | 269 | 269 | 270 | 273 | 274 | 274 |
| Gender | | | | | | |
| Male | 269 | 270 | 271 | 274 | 276 | 276 |
| Female | 268 | 268 | 270 | 272 | 273 | 272 |
| Race and Hispanic origin | | | | | | |
| White, non-Hispanic | 274 | 274 | 276 | 279 | 281 | 281 |
| Black, non-Hispanic | 240 | 249 | 249 | 250 | 252 | 252 |
| Hispanic[a] | 252 | 254 | 255 | 259 | 256 | 256 |
| Parents' education | | | | | | |
| Less than high school | 251 | 252 | 253 | 256 | 255 | 254 |
| Graduated high school | 263 | 263 | 263 | 263 | 266 | 267 |
| Some education after high school | 275 | 274 | 277 | 278 | 277 | 278 |
| Graduated college | 282 | 280 | 280 | 283 | 285 | 283 |
| Age 17 | | | | | | |
| Total | 299 | 302 | 305 | 307 | 306 | 307 |
| Gender | | | | | | |
| Male | 302 | 305 | 306 | 309 | 309 | 310 |
| Female | 296 | 299 | 303 | 305 | 304 | 305 |
| Race and Hispanic origin | | | | | | |
| White, non-Hispanic | 304 | 308 | 310 | 312 | 312 | 313 |
| Black, non-Hispanic | 272 | 279 | 289 | 286 | 286 | 286 |
| Hispanic[a] | 277 | 283 | 284 | 292 | 291 | 292 |
| Parents' education | | | | | | |
| Less than high school | 279 | 279 | 285 | 286 | 284 | 281 |
| Graduated high school | 293 | 293 | 294 | 298 | 295 | 297 |
| Some education after high school | 304 | 305 | 308 | 308 | 305 | 307 |
| Graduated college | 312 | 314 | 316 | 316 | 318 | 317 |

[a] Persons of Hispanic origin may be of any race.

NOTE: Data on parent's level of education are not reliable for 9-year-olds.
The mathematics proficiency scale ranges from 0 to 500:

Level 150: Simple arithmetic facts
Level 200: Beginning skills and understandings
Level 250: Numerical operations and beginning problem solving
Level 300: Moderately complex procedures and reasoning
Level 350: Multi-step problem solving and algebra

SOURCE: U. S. Department of Education, National Center for Education Statistics, National Assessment of Educational Progress (NAEP), *1996 Trends in Academic Progress.*

**Table ED3.B** Reading achievement: Average scale scores of students ages 9, 13, and 17 by age and child and family characteristics, selected years 1980-96

| Characteristic | 1980 | 1984 | 1988 | 1990 | 1992 | 1994 | 1996 |
|---|---|---|---|---|---|---|---|
| Age 9 | | | | | | | |
| Total | 215 | 211 | 212 | 209 | 211 | 211 | 212 |
| Gender | | | | | | | |
| Male | 210 | 208 | 208 | 204 | 206 | 207 | 207 |
| Female | 220 | 214 | 216 | 215 | 215 | 215 | 218 |
| Race and Hispanic origin | | | | | | | |
| White, non-Hispanic | 221 | 218 | 218 | 217 | 218 | 218 | 220 |
| Black, non-Hispanic | 189 | 186 | 189 | 182 | 185 | 185 | 190 |
| Hispanic[a] | 190 | 187 | 194 | 189 | 192 | 186 | 194 |
| Age 13 | | | | | | | |
| Total | 259 | 257 | 258 | 257 | 260 | 258 | 259 |
| Gender | | | | | | | |
| Male | 254 | 253 | 252 | 251 | 254 | 251 | 253 |
| Female | 263 | 262 | 263 | 263 | 265 | 266 | 265 |
| Race and Hispanic origin | | | | | | | |
| White, non-Hispanic | 264 | 263 | 261 | 262 | 266 | 265 | 267 |
| Black, non-Hispanic | 233 | 236 | 243 | 242 | 238 | 234 | 236 |
| Hispanic[a] | 237 | 240 | 240 | 238 | 239 | 235 | 240 |
| Parents' education | | | | | | | |
| Less than high school | 239 | 240 | 247 | 241 | 239 | 237 | 241 |
| Graduated high school | 254 | 253 | 253 | 251 | 252 | 251 | 252 |
| Post high school | 271 | 268 | 265 | 267 | 270 | 269 | 270 |
| Age 17 | | | | | | | |
| Total | 286 | 289 | 290 | 290 | 290 | 288 | 287 |
| Gender | | | | | | | |
| Male | 282 | 284 | 286 | 284 | 284 | 282 | 280 |
| Female | 289 | 294 | 294 | 297 | 296 | 295 | 294 |
| Race and Hispanic origin | | | | | | | |
| White, non-Hispanic | 293 | 295 | 295 | 297 | 297 | 296 | 294 |
| Black, non-Hispanic | 243 | 264 | 274 | 267 | 261 | 266 | 265 |
| Hispanic[a] | 261 | 268 | 271 | 275 | 271 | 263 | 265 |
| Parents' education | | | | | | | |
| Less than high school | 262 | 269 | 267 | 270 | 271 | 268 | 267 |
| Graduated high school | 278 | 281 | 282 | 283 | 281 | 276 | 273 |
| Post high school | 299 | 301 | 300 | 300 | 299 | 299 | 297 |

[a] Persons of Hispanic origin may be of any race.

NOTE: Data on parent's level of education are not reliable for 9-year-olds.
The reading proficiency scale has a range from 0 to 500:

Level 150: Simple, discrete reading tasks
Level 200: Partial skills and understanding
Level 250: Interrelates ideas and makes generalizations
Level 300: Understands complicated information
Level 350: Learns from specialized reading materials

SOURCE: U. S. Department of Education, National Center for Education Statistics, National Assessment of Educational Progress (NAEP), *1996 Trends in Academic Progress*.

**Table ED4** High school completion: Percentage completing high school among 18- to 24-year-olds[a] by method of completion, race, and Hispanic origin, selected years 1980-96

| Characteristic | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994[b] | 1995[b] | 1996[b] |
|---|---|---|---|---|---|---|---|---|---|
| Total[c] | | | | | | | | | |
| Total completing high school[d] | 84 | 85 | 86 | 85 | 86 | 86 | 86 | 85 | 86 |
| Method of completion | | | | | | | | | |
| Diploma | — | — | 81 | 81 | 81 | 81 | 79 | 78 | 76 |
| Equivalent[e] | — | — | 5 | 4 | 5 | 5 | 7 | 8 | 10 |
| White, non-Hispanic | | | | | | | | | |
| Total completing high school | 88 | 88 | 90 | 89 | 91 | 90 | 91 | 90 | 92 |
| Method of completion | | | | | | | | | |
| Diploma | — | — | 85 | 85 | 86 | 86 | 84 | 83 | 81 |
| Equivalent[e] | — | — | 5 | 4 | 5 | 5 | 6 | 7 | 11 |
| Black, non-Hispanic | | | | | | | | | |
| Total completing high school | 75 | 81 | 83 | 83 | 82 | 82 | 83 | 85 | 83 |
| Method of completion | | | | | | | | | |
| Diploma | — | — | 78 | 77 | 76 | 76 | 75 | 75 | 73 |
| Equivalent[e] | — | — | 5 | 5 | 6 | 6 | 8 | 9 | 10 |
| Hispanic[f] | | | | | | | | | |
| Total completing high school | 57 | 67 | 59 | 57 | 62 | 64 | 62 | 63 | 62 |
| Method of completion | | | | | | | | | |
| Diploma | — | — | 55 | 53 | 57 | 58 | 54 | 54 | 55 |
| Equivalent[e] | — | — | 4 | 3 | 6 | 6 | 8 | 9 | 7 |

— = not available

[a] For those not currently enrolled in high school or below.

[b] Numbers in these years may reflect changes in Current Population Survey (CPS) because of newly instituted computer-assisted interviewing techniques and/or because of the change in the population controls to the 1990 Census-based estimates, with adjustments.

[c] Percentages not shown separately for non-Hispanic Asians/Pacific Islanders and American Indians/Alaska Natives, but they are included in the total.

[d] This was measured as completing 4 years of high school in 1980-1991.

[e] Diploma equivalents include alternative credentials obtained by passing exams such as the General Education Development (GED) test.

[f] Persons of Hispanic origin may be of any race.

SOURCE: U.S. Bureau of the Census, October Current Population Survey (various years); McMillen, M., and Kaufman, P. 1996. *Dropout rates in the United States: 1996*. U.S. Department of Education, National Center for Education Statistics.

**Table ED5**

**Youth neither enrolled in school nor working: Percentage of youth ages 16 to 19 who are neither enrolled in school nor working by gender, race, Hispanic origin, and age, selected years 1985-97**

| Characteristic | 1985 | 1990 | 1991 | 1992 | 1993 | 1994[a] | 1995[a] | 1996[a] | 1997[a] |
|---|---|---|---|---|---|---|---|---|---|
| Total | 11.2 | 10.0 | 10.5 | 10.1 | 9.5 | 9.6 | 9.3 | 9.3 | 8.8 |
| **Gender** | | | | | | | | | |
| Male | 9.2 | 8.1 | 8.5 | 8.2 | 7.8 | 8.1 | 7.9 | 7.9 | 7.9 |
| Female | 13.2 | 11.9 | 12.5 | 12.0 | 11.2 | 11.0 | 10.8 | 10.7 | 9.7 |
| **Race and Hispanic origin** | | | | | | | | | |
| White | 10.0 | 9.2 | 9.4 | 8.8 | 8.4 | 8.7 | 8.3 | 8.3 | 7.7 |
| Black | 18.1 | 14.6 | 16.8 | 16.9 | 15.0 | 14.3 | 14.6 | 14.5 | 14.3 |
| Hispanic[b] | 16.5 | 16.8 | 16.0 | 16.5 | 16.4 | 16.8 | 15.9 | 15.5 | 14.2 |
| **Age group[c]** | | | | | | | | | |
| Ages 16-17 | — | — | — | — | — | — | 4.3 | 4.2 | 4.2 |
| Ages 18-19 | — | — | — | — | — | — | 14.6 | 14.7 | 13.5 |

— = not available

[a] Data for 1994 and subsequent years are not strictly comparable with data for prior years, because of major revisions in the Current Population Survey questionnaire and data-collection methodology, and because of the inclusion of 1990 census-based population controls in the estimation process.

[b] Persons of Hispanic origin may be of any race.

[c] Results by age are from non-composited estimates and are not comparable to data from published tables.

NOTE: The figures represent an average based on responses to the survey questions for the months that youth are usually in school (January through May and September through December).

SOURCE: U.S. Bureau of Labor Statistics, Current Population Surveys.

## Table ED6

Higher education: Percentage of high school graduates ages 25 to 29 attaining higher degrees by highest degree attained, race, and Hispanic origin, selected years 1980-97

| Degree type, race and Hispanic origin | 1980 | 1985 | 1990 | 1991 | 1992 | 1993 | 1994[a] | 1995[a] | 1996[a] | 1997[a] |
|---|---|---|---|---|---|---|---|---|---|---|
| Bachelor's degree or higher[b] | | | | | | | | | | |
| Total | 26 | 26 | 27 | 27 | 27 | 27 | 27 | 28 | 31 | 32 |
| Race and Hispanic origin | | | | | | | | | | |
| White, non-Hispanic | 28 | 27 | 29 | 30 | 30 | 30 | 30 | 31 | 34 | 35 |
| Black, non-Hispanic | 15 | 14 | 16 | 13 | 14 | 16 | 16 | 18 | 17 | 16 |
| Hispanic[c] | 13 | 18 | 14 | 16 | 16 | 14 | 13 | 16 | 16 | 18 |
| Associate degree | | | | | | | | | | |
| Total | — | — | — | — | 8 | 9 | 10 | 10 | 10 | 9 |
| Race and Hispanic origin | | | | | | | | | | |
| White, non-Hispanic | — | — | — | — | 8 | 9 | 10 | 10 | 10 | 9 |
| Black, non-Hispanic | — | — | — | — | 8 | 6 | 8 | 8 | 8 | 7 |
| Hispanic[c] | — | — | — | — | 7 | 8 | 9 | 7 | 8 | 9 |

— = not available

[a] Data for 1994 and subsequent years are not strictly comparable with data for prior years, because of major revisions in the Current Population Survey questionnaire and data-collection methodology, and because of the inclusion of 1990 census-based population controls in the estimation process.

[b] This was measured as completing 4 or more years of college in 1980-1991.

[c] Persons of Hispanic origin may be of any race.

NOTE: Analyses of the 1993 Baccalaureate and Beyond Longitudinal Study indicated that about 10 percent of all persons attaining a bachelor's degree in that year had previously earned an associate degree. National Center for Education Statistics.

SOURCE: U.S. Bureau of the Census, March Current Population Surveys; U.S. Department of Education, National Center for Education Statistics, *The Condition of Education, 1998* and tabulations.

## Table SPECIAL1

Percentage of children ages 1 to 5 with blood lead levels of 10 micrograms per deciliter or more by poverty status, 1976-80 and 1988-94

| Poverty status | 1976-80 | 1988-94 |
|---|---|---|
| Total | 88.2 | 6.2 |
| Poverty status | | |
| Below poverty | 94.2 | 12.3 |
| At or above poverty | 86.9 | 3.5 |

SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, Second and Third National Health and Nutrition Examination Surveys.

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**Table SPECIAL2** Number and percentage of children under age 6[a] participating in child care and early education programs on a regular basis by type of arrangement and child and family characteristics, 1995

| Characteristic | Number (in thousands) | Percentage in nonparental arrangement[b] | | | | Percentage in parental care |
|---|---|---|---|---|---|---|
| | | Total | In relative care | In non-relative care | Organized child care facility[c] | |
| Total | 21,421 | 60 | 21 | 18 | 31 | 40 |
| **Age[d]** | | | | | | |
| Less than 1 year old | 4,158 | 45 | 24 | 17 | 7 | 55 |
| Age 1 | 4,027 | 50 | 24 | 19 | 11 | 50 |
| Age 2 | 4,007 | 54 | 19 | 20 | 19 | 46 |
| Age 3 | 4,126 | 68 | 21 | 19 | 41 | 32 |
| Age 4 | 4,065 | 78 | 18 | 15 | 65 | 22 |
| Age 5 | 1,038 | 84 | 15 | 17 | 75 | 16 |
| **Race and Hispanic origin** | | | | | | |
| White, non-Hispanic | 13,996 | 62 | 18 | 21 | 33 | 38 |
| Black, non-Hispanic | 3,344 | 66 | 31 | 12 | 33 | 34 |
| Hispanic[e] | 2,838 | 46 | 23 | 12 | 17 | 54 |
| Other | 1,243 | 58 | 25 | 13 | 28 | 42 |
| **Poverty status** | | | | | | |
| At or above poverty threshold | 14,517 | 65 | 20 | 22 | 34 | 35 |
| Below poverty threshold | 6,904 | 49 | 23 | 11 | 23 | 51 |
| **Mother's education[f]** | | | | | | |
| Less than high school | 3,055 | 38 | 20 | 7 | 16 | 62 |
| High school/ GED | 7,328 | 56 | 23 | 15 | 26 | 44 |
| Vocational/technical or some college | 6,016 | 66 | 24 | 19 | 34 | 34 |
| College graduate | 3,478 | 70 | 15 | 26 | 42 | 30 |
| Graduate or professional degree | 1,246 | 79 | 16 | 36 | 45 | 22 |
| **Mother's employment status[f]** | | | | | | |
| Worked 35 hours or more per week | 7,101 | 88 | 33 | 32 | 39 | 12 |
| Worked less than 35 hours per week | 4,034 | 75 | 30 | 26 | 35 | 25 |
| Looking for work | 1,635 | 42 | 16 | 4 | 25 | 58 |
| Not in labor force | 8,354 | 32 | 7 | 6 | 22 | 68 |

[a] Estimates are based on children under 6 years old who have yet to enter kindergarten.

[b] Columns do not add up to total because some children participated in more than one type of nonparental arrangement.

[c] Organized child care facilities include day care centers, Head Start programs, preschools, prekindergartens, and other early childhood programs.

[d] Age is calculated as of December 31, 1994.

[e] Persons of Hispanic origin may be of any race.

[f] Children without mothers are not included in estimates dealing with mother's education or mother's employment status.

SOURCE: U.S. Department of Education, National Center for Education Statistics, National Household Education Survey, 1995.

# Appendix B: Data Source Descriptions

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# Data Source Descriptions

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# Data Source Descriptions

## American Housing Survey

This survey provides data necessary for evaluating progress made toward "a decent home and a suitable living environment for every American family," affirmed in the basic 1949 and 1968 legislation. The data come from a Census Bureau nationwide sample survey in odd-numbered years for national, regional, and metropolitan/non-metropolitan data, and from surveys in 47 MSAs over a multi-year cycle. These data detail the types, size, conditions, characteristics, housing costs and values, equipment, utilities, and dynamics of the housing inventory; they describe the demographic, financial, and mobility characteristics of the occupants; and give as well some information on neighborhood conditions.

Agency Contact:
Kathy Nelson
Department of Housing and Urban Development
Phone: (202) 708-1520

## Continuing Survey of Food Intakes by Individuals

The Continuing Survey of Food Intakes by Individuals (CSFII) is designed to measure what Americans eat and drink. Uses of the survey include: monitoring the nutritional adequacy of American diets, measuring the impact of food fortification on nutrient intakes, developing dietary guidance and related programs, estimating exposure of population groups to food contaminants, evaluating the nutritional impact of food assistance programs, and assessing the need for agricultural products. The 1989-91 CSFII sample consisted of individuals residing in households and included oversampling of the low-income population. Individuals were asked to provide 3 consecutive days of dietary data. The 1994-96 CSFII also included individuals living in households and oversampling of the low-income population. In each of the 3 survey years, respondents were asked to provide, through in-person interviews, food intake data on 2 nonconsecutive days, with both days of intake collected by the 24-hour recall method. Intake data were provided by 3,937 children under 18 years of age in 1989-91 and 5,354 children in 1994-96.

For more information on CSFII 1989-91, see: Tippett, K.S., Mickle, S.J., Goldman, J.D., *et al.* (1995). *Food and nutrient intakes by individuals in the United States, 1 day, 1989-91.* U.S. Department of Agriculture, Agricultural Research Service, NFS Rep. No. 91-2.

For more information on CSFII 1994-96, see: Tippett, K.S., and Cypel, Y.S., eds. (1998). *Design and operation: The Continuing Survey of Food Intakes by Individuals and the Diet and Health Knowledge Survey, 1994-96.* U.S. Department of Agriculture, Agriculture Research Service, NFS Rep. No. 96-1.

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## Current Population Survey

*Core Survey and Supplements.* The Current Population Survey (CPS) is a nationwide sample survey of about 50,000 households conducted monthly for the Bureau of Labor Statistics by the Bureau of the Census. At present, there are 754 CPS sampling areas in the United States, with coverage in every States and the District of Columbia.

The CPS core survey is the primary source of information on the employment characteristics of the civilian noninstitutional population, 16 years old and older, including estimates of unemployment released every month by the Bureau of Labor Statistics.

In addition to the core survey, monthly CPS supplements provide additional demographic and social data. The March demographic supplement and the October school enrollment supplement provide information used to estimate the status and well being of children. Every year, the October supplement to the CPS asks questions on school enrollment by grade and other school characteristics about each member of the household ages 3 and older. Data on years of school completed are derived from two questions on the March supplement to the CPS. The March and October supplements have been administered every year since 1947. The April food security supplement, introduced in 1995, is described in detail below.

In 1994, the questionnaire for the CPS was redesigned, and the computer-assisted personal interviewing (CAPI) method was implemented. In addition, the 1990 Census-based population controls, with adjustments for the estimated population undercount, were also introduced. For more information regarding the CPS, its sampling structure, and estimation methodology, see "Explanatory Notes and Estimates of Error," in *Employment and Earnings*, January 1997, vol. 44, no. 1, U.S. Department of Labor, Bureau of Labor Statistics, pp. 225-242. A more comprehensive

description of the CPS that will incorporate the revisions and methodological changes introduced in 1994 is currently in preparation.

*Food Security Supplement.* The food security supplement is a new survey instrument developed through a long and rigorous process. The content of the supplement is based on material reported in prior research on hunger and food insecurity. It was subjected to extensive testing by the Bureau of the Census. It reflects the consensus of nearly 100 experts at the 1994 Food Security and Measurement Conference convened jointly by the National Center for Health Statistics and the Food and Nutrition Service of the Department of Agriculture. The supplement was developed, tested, and refined further by the conferees, members of a Federal interagency working group, and survey methods specialists from the Census Bureau's Center for Survey Methods Research. The survey contains a systematic set of questions intended to identify levels of food insecurity on both a 12-month and a 30-day basis. Data presented in this report are 12-month data from the April 1995 Food Security Supplement. Approximately 53,700 households completed the April 1995 CPS core survey. Of these, 44,730 (83.3 percent) completed the supplement. The respondents completing the supplement included households at all income levels, both above and below the Federal poverty threshold. Special final supplement sample weights were computed to adjust for the demographic characteristics of supplement non-interviews.

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For information on food security:
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For information on secure parental employment, family income, and youth neither enrolled in school nor working:
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## Monitoring the Future

Monitoring the Future consists of annual surveys of 8th-, 10th-, and 12th-grade students, covering the values, behaviors, and lifestyle orientations of American youth. Investigators have conducted surveys of 12th-grade students annually since 1975, and have surveyed 8th- and 10th-grade students annually since 1991. The 1997 senior survey is a multi-stage probability sample of 15,400 students in 135 public and private schools. The sample size for the 10th-grade survey in 1997 was 15,500 students in 125 schools and the 8th-grade sample included 18,600 students in 160 schools. All samples are nationally representative. Questionnaires are administered in school, generally during a normal class period.

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## National Assessment of Educational Progress

The National Assessment of Educational Progress (NAEP) is mandated by Congress to monitor continuously the knowledge, skills, and performance of the Nation's children and youth. NAEP assesses students aged 9, 13, and 17 and students at various grade levels in reading and mathematics at least every 2 years, in science and writing at least every 4 years, and in history or geography and other subjects at least every 6 years. A variation of matrix sampling is used so that the

results from a large number of items could be generalized to an entire population. Approximately 2,600 students respond to each block of items. Performance data are reported by scaled proficiency items.

NAEP has been designed to produce a representative sample at the national level. In each of the 1990-96 assessments, investigators collected data from a national probability sample of more than 45,000 students per age/grade or a total of about 146,000 students in nearly 2,100 schools. Performance data are reported for the Nation and for various subgroups categorized by variables such as region, gender, race/ethnicity, parental education, type of school, and type and size of community.

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## National Crime Victimization Survey

The National Crime Victimization Survey (NCVS) is the Nation's primary source of information on criminal victimization. Each year, researchers obtained data from a nationally representative sample of roughly 49,000 households comprising more than 100,000 persons 12 years of age and older on the frequency, characteristics, and consequences of criminal victimization in the United States. The survey fully reports the likelihood of victimization by rape, sexual assault, robbery, assault, theft, household burglary, and motor vehicle theft for the population as a whole, as well as for segments of the population such as adolescents over the age of 12, women, the elderly, members of various racial groups, city dwellers, or other groups. Victims are also asked about whether they reported the incident to the police and, in the instances of personal violent crimes, they are asked about the characteristics of the perpetrator. The NCVS provides the largest national forum for victims to describe the impact of crime and the characteristics of violent offenders. It has been ongoing since 1973 and was redesigned in 1992.

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## National Health and Nutrition Examination Survey

The National Health and Nutrition Examination Survey (NHANES) II, conducted between 1976 and 1980, and the National Health and Nutrition Examination Survey III, conducted between 1988 and 1994, were probability sample surveys of the noninstitutionalized U.S. population conducted by the National Center for Health Statistics, Centers for Disease Control and Prevention. The purpose of NHANES is to monitor indicators of the nutrition and health status of the American people through dietary intake data, biochemical tests, physical measurements, and clinical assessments. NHANES II collected information on person 6 months to 74 years of age, while NHANES III collected information on persons 2 months of age and over. The surveys consisted of a questionnaire and various physical and physiological measures, including the data on blood lead levels shown in the Special Feature.

For more information on NHANES II, see: McDowell, A., Engel, A., Massey, J.T., and Maurer, K. (1981). Plan and operation of the second National Health and Nutrition Examination Survey, 1976-80. *Vital and Health Statistics, 1* (15). Hyattsville, MD: National Center for Health Statistics.

For more information on NHANES III, see: Ezzati, T.M., Massey, J.T., Waksberg, J., *et al.* (1992). Sample design: Third National Health and Nutrition Examination Survey. *Vital and Health Statistics, 2* (113). Hyattsville, MD: National Center for Health Statistics. National Center for Health Statistics. (1994). Plan and operation of the Third National Health and Nutrition Examination Survey, 1988-94. *Vital and Health Statistics, 1* (32). Hyattsville, MD: National Center for Health Statistics.

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## National Health Interview Survey

The National Health Interview Survey (NHIS) is a continuing nationwide sample survey of the civilian non-institutionalized population in which data are collected by personal household interviews. Interviewers obtain information on personal and demographic characteristics, including race and

ethnicity by self-reporting or as reported by an informant. Investigators also collect data about illnesses, injuries, impairments, chronic conditions, activity limitation caused by chronic conditions, utilization of health services, and other health topics. Each year the survey is reviewed and special topics are added or deleted. For most health topics, the survey collects data over an entire year.

The sample includes an over-sample of black and Hispanic persons and is designed to allow the development of national estimates of health conditions, health service utilization, and problems of the U.S. civilian non-institutionalized population. The response rate for the ongoing part of the survey has been between 94 and 98 percent over the years. In 1995, interviewers collected information for the basic questionnaire on 102,467 persons, including 29,711 children.

Descriptions of the survey design, the methods used in estimation, and the general qualifications of the data are presented in:

- Massey, J.T., Moore, T.F., Parsons, V.L., and Tadros, W. (1989). Design and estimation for the National Health Interview Survey, 1985-1994. *Vital and Health Statistics, 2* (110). Hyattsville, MD: National Center for Health Statistics.
- Adams, P.F., and Marano, M. (1995). Current Estimates from the National Health Interview Survey, 1994. *Vital and Health Statistics 10* (193). Hyattsville, MD: National Center for Health Statistics.

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## National Household Education Survey

The National Household Education Survey (NHES) conducted by the National Center for Education Statistics collects detailed information about education issues through a household-based survey through telephone interviews. The sample for the NHES is drawn from the noninstitutionalized civilian population in households having a telephone in the 50 States and the District of Columbia. In each survey, between 54,000 and 64,000 households are screened to identify persons eligible for one of the topical components. Generally, each collection covers two topical components, and researchers conduct between 10,000 and 15,000 interviews for each component. The data are weighted to permit estimates of the entire population. In addition, the NHES design samples minorities at a higher rate in order to increase the reliability of estimates for these groups.

The 1991 NHES contained a component on early childhood program participation. Investigators screened approximately 60,000 households to identify a sample of about 14,000 children, 3 to 8 years old. They interviewed parents of the children in order to collect information about the children's educational activities and the role of the family in the children's learning. In 1993, NCES fielded a school readiness component in which parents of approximately 11,000 children age 3 through second grade were asked about their children's experiences in early childhood programs, developmental level, school adjustment and related problems, early primary school experiences, general health and nutrition status, home activities, and family characteristics, including family stability and economic risk factors. In 1995, NCES also fielded an early childhood program participation component, similar to that of 1991. It entailed screening approximately 44,000 households, and the interviewing of 14,000 parents of children from birth through third grade. In 1996, NCES fielded a parent and family involvement in education component, interviewing nearly 21,000 parents of children from age 3 through 12th grade.

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## National Immunization Survey

The National Immunization Survey (NIS) is a continuing nationwide telephone sample survey among children 19 to 35 months of age. Estimates of vaccine-specific coverage are available for national, State, and 28 urban areas.

The NIS uses a two-stage sample design. First, a random-digit-dialing sample of telephone numbers is drawn. When households with age-eligible children are contacted, the interviewer collects information on the vaccinations received by all age-eligible children. The interviewer also collects information on the vaccination providers. In the second phase, all vaccination providers are contacted by mail. Providers' responses are combined with information obtained from the households to render estimates of vaccination

coverage levels more accurate. Final estimates are adjusted for non-coverage of non-telephone households.

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## National Linked File of Live Births and Infant Deaths

The national linked file of live births and infant deaths is a data file for research on infant mortality. Beginning with the 1995 data, this file is being released first as a period data file rather than as a cohort file. In the birth cohort format, it comprises linked vital records for infants born in a given year who died in that year or the next year before their first birthday. In the period format, the numerator consists of all infant deaths occurring in one year, with deaths linked to the corresponding birth certificates from that year or the previous year. The linked file includes all the variables on the national natality file, as well as medical information reported for the same infant on the death record and the age of the infant at death. The use of linked files avoids discrepancies in the reporting of race between the birth and infant death certificates. Although discrepancies are rare for white and black infants, they can be substantial for other races. National linked files are available starting with the birth cohort of 1983. No linked file was produced for 1992 through 1994 data years. Beginning with 1995 data, national linked files are initially released in a period format followed by a cohort format. Match completeness for each of the birth cohort files is about 98 percent. The linked files are available after the regular vital statistics files, because construction of the cohort linked file requires that 2 years of mortality data be linked to each birth cohort. The period linked files should be produced in a much more timely fashion.

For more information, see: Prager, K. (1994). Infant mortality by birthweight and other characteristics: United States, 1985 birth cohort. *Vital and Health Statistics, 20* (24). Hyattsville, MD: National Center for Health Statistics. Public use data file documentation: Linked birth/infant death data set - 1995 period data. (1997). Hyattsville, MD: National Center for Health Statistics.

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## National Vital Statistics System

Through the National Vital Statistics System, the National Center for Health Statistics (NCHS) collects and publishes data on births, deaths, marriages, and divorces in the United States. NCHS obtains information on births and deaths from the registration offices of all States, New York City, and the District of Columbia.

Demographic information on birth certificates, such as race and ethnicity, is provided by the mother at the time of birth. Hospital records provide the base for information on prenatal care, while funeral directors provide demographic information on death certificates. Medical certification of cause of death is provided by a physician, medical examiner, or coroner.

*Information on Hispanic origin.* The number of States gathering information on births to parents of Hispanic origin has increased gradually since 1980-81, when 22 States included this information on birth certificates. By 1993, the Hispanic origin of the mother was reported on birth certificates in all 50 States and the District of Columbia. Similarly, mortality data by Hispanic origin of decedent have become more complete over time. Based on data from the U.S. Bureau of the Census, 99.6 percent of the U.S. Hispanic population resides in areas that report deaths by Hispanic origin.

*Preliminary data.* A continuous receipt of statistical records by NCHS from the States' vital registration systems supplies preliminary data. Investigators weight individual records of births and deaths to independent counts of vital events registered in each State and reported to NCHS. These independent counts, aggregated for a 12-month period, serve as control totals, and are the basis for the individual unit record weights in the preliminary file. For selected variables, unknown or not-stated values are imputed. The percent not stated is generally 1 percent or less, except for prenatal care, which is 2.2 percent.

For more information on national natality and mortality data, see: National Center for Health Statistics. Technical Appendix. *Vital Statistics of the*

*United States*, I, (Natality), DHHS Pub. No. (PHS) 96-1100, (1992), and II, (Mortality), Part A, DHHS Pub. No. (PHS) 96-1101, (1996). Washington, DC: Public Health Service. Mortality information is also available online at

http://www.cdc.gov/nchswww/about/major/dvs/mortdata.htm

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## Population Estimates

Decennial census data serve as benchmarks for deriving national population estimates, which are also based on data from the following agencies: Births and deaths (National Center for Health Statistics); immigrants (Immigration and Naturalization Service); Armed Forces (Department of Defense); net movement between Puerto Rico and the U.S. mainland (Puerto Rico Planning Board); and Federal employees abroad (Office of Personnel Management and Department of Defense). Similar data serve as the basis for State estimates, which are also derived from a variety of data series, including school statistics from State departments of education and parochial school systems. Current estimates are consistent with official decennial census figures and do not reflect estimated decennial census under-enumeration.

After decennial population censuses, intercensal population estimates for the preceding decade are prepared to replace postcensal estimates. Intercensal population estimates are more accurate than postcensal estimates, because they take into account the census of population at the beginning and end of the decade. Intercensal estimates have been repaired for the 1960s, 1970s, and 1980s to correct the "error of closure": the difference between the estimated population at the end of the decade and the census count for that date. The error of closure at the national level was quite small during the 1960s (379,000). For the 1970s, however, it amounted to almost 5 million. In the 1980s the error of closure dropped to 1.5 million.

For more information, see: U.S. Bureau of the Census. (1992). U.S. population estimates by age, sex, race and Hispanic origin: 1980-1991. *Current Population Reports*, (1095, Series P-25). Washington, DC: U.S. Bureau of the Census.

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## Population Projections

National population projections begin with recent population estimates by age, race, and Hispanic origin. These statistics are then projected forward to 2050, based on assumptions about fertility, mortality, and international migration. Low, middle, and high growth assumptions are made for each of these components. The current middle series assumptions are:

- Each race/ethnic group's fertility will remain constant at 1993-1994 levels.
- Each race/ethnic group's mortality will continue to change as it did in the 1980s.
- Each race/ethnic group's net international migration generally will continue at the same levels as that of the past decade.

For more information, see: U.S. Bureau of the Census. (1996). *Population Projections of the United States by Age, Sex, Race, and Hispanic Origin*, (1130, Series P25). Washington, DC: U.S. Bureau of the Census.

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